



**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**Van Orden for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	168077.34	727378.45
(b) Total Contribution Refunds (from Line 20(d)) .....	60.00	20026.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	168017.34	707352.45
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	266557.71	419069.10
(b) Total Offsets to Operating Expenditures (from Line 14).....	55.00	55.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	266502.71	419014.10
8. Cash on Hand at Close of Reporting Period (from Line 27).....	288338.35	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	7186.37	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Van Orden for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	135710.00	596596.00
(ii) Unitemized.....	31797.34	123212.45
(iii) TOTAL of contributions from individuals ▶	167507.34	719808.45
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	500.00	7500.00
(d) The Candidate.....	70.00	70.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	168077.34	727378.45
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	55.00	55.00
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	168132.34	727433.45

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	266557.71	419069.10
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	60.00	20026.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	60.00	20026.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	266617.71	439095.10

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	386823.72
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	168132.34
25. SUBTOTAL (add Line 23 and Line 24).....	554956.06
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	266617.71
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	288338.35

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

Form/Schedule: F3A  
Transaction ID :

For all Ultimate Vendor Payee disbursements, any transaction below the itemization threshold in the aggregate will not appear as a memo entry.

Form/Schedule:  
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 6 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WINRED**  
 Mailing Address PO BOX 9891  
 City ARLINGTON State VA Zip Code 22219-1891  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 258553.95

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 01 2020  
**Transaction ID : SA11C.296411**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B.** Full Name (Last, First, Middle Initial)  
**ANDERSON, KARL, , MR.,**  
 Mailing Address 1432 TAMBERWOOD TR  
 City ST. PAUL State MN Zip Code 55125-3363  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED DENTIST  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 525.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 01 2020  
**Transaction ID : SA11A.2970**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
**WINRED**  
 Mailing Address PO BOX 9891  
 City ARLINGTON State VA Zip Code 22219-1891  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 258553.95

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 03 2020  
**Transaction ID : SA11C.300026**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

50.00

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

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

FOR LINE NUMBER: PAGE 7 OF 114  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address **3212 WEST SANTIAGO STREET**  
**APT. A**

City <b>TAMPA</b>	State <b>FL</b>	Zip Code <b>33629-7146</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>
------------------------------------	------------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**250.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**07 / 03 / 2020**

**Transaction ID : SA11A.3002**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**  
**EARMARKED FROM WINRED**

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

Mailing Address **PO BOX 9891**

City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22219-1891</b>
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FEC ID number of contributing federal political committee. **C C00694323**

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**258553.95**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**07 / 03 / 2020**

**Transaction ID : SA11C.300027**

Amount of Each Receipt this Period  
**15.00**

Memo Item  
**CONTRIBUTION**  
**SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD**

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

Mailing Address **720 CLEVELAND STREET**

City <b>FENNIMORE</b>	State <b>WI</b>	Zip Code <b>53809-1516</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>
------------------------------------	------------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**230.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**07 / 03 / 2020**

**Transaction ID : SA11A.3003**

Amount of Each Receipt this Period  
**15.00**

Memo Item  
**CONTRIBUTION**  
**EARMARKED FROM WINRED**

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	<b>265.00</b>
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 8 OF 114	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address **PO BOX 9891**

City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22219-1891</b>
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FEC ID number of contributing federal political committee. **C C00694323**

Name of Employer	Occupation

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**258553.95**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
07 / 04 / 2020

**Transaction ID : SA11C.300531**

Amount of Each Receipt this Period  

50.00
-------

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B.** Full Name (Last, First, Middle Initial)  
**RADUECHEL, RONALD, A., MR.,**

Mailing Address **2404 BROKEN HILL ROAD**

City <b>WAUKESHA</b>	State <b>WI</b>	Zip Code <b>53188-1554</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>
------------------------------------	------------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**350.00**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
07 / 04 / 2020

**Transaction ID : SA11A.3007**

Amount of Each Receipt this Period  

50.00
-------

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

Mailing Address **PO BOX 9891**

City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22219-1891</b>
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FEC ID number of contributing federal political committee. **C C00694323**

Name of Employer	Occupation

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**258553.95**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
07 / 05 / 2020

**Transaction ID : SA11C.301238**

Amount of Each Receipt this Period  

500.00
--------

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

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

50.00



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

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

FOR LINE NUMBER: PAGE 9 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HINZ, PETER, , MR.,**  
Mailing Address 1312 CLIFTON LANE

City NASHVILLE State TN Zip Code 37215-1614

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

Name of Employer COOL SPRINGS CHIROPRACTIC Occupation CHIROPRACTOR

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 05 / 2020

Transaction ID : SA11A.3016

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
**FETTIG, ROBERT, P., MR.,**  
Mailing Address N2425 MAIN RD

City LAKE GENEVA State WI Zip Code 53147-3808

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

Name of Employer TANKCRAFT CORP. Occupation BUSINESS MANAGER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 07 / 2020

Transaction ID : SA11A.3107

Amount of Each Receipt this Period  
2800.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**FOX, BRENT, A., MR.,**  
Mailing Address 2501 NORTH PARKER DRIVE

City JANESVILLE State WI Zip Code 53545-

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

Name of Employer HENDRICKS HOLDING CO. Occupation EXECUTIVE

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 07 / 2020

Transaction ID : SA11A.3106

Amount of Each Receipt this Period  
2800.00

Memo Item  
CONTRIBUTION  
SEE REDESIGNATION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 6100.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 114  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address **2501 NORTH PARKER DRIVE**

City **JANESVILLE** State **WI** Zip Code **53545-**

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

Name of Employer **HENDRICKS HOLDING CO.** Occupation **EXECUTIVE**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**5600.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**07 / 13 / 2020**

**Transaction ID : SA11A.3115**

Amount of Each Receipt this Period  
**2800.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION FROM PRIMARY**

**B.** Full Name (Last, First, Middle Initial)  
**FOX, BRENT, A., MR.,**

Mailing Address **2501 NORTH PARKER DRIVE**

City **JANESVILLE** State **WI** Zip Code **53545-**

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

Name of Employer **HENDRICKS HOLDING CO.** Occupation **EXECUTIVE**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**5600.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**07 / 13 / 2020**

**Transaction ID : SA11A.3115B**

Amount of Each Receipt this Period  
**- 2800.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION TO GENERAL**

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

Mailing Address **622 BENNORA LEE COURT**

City **LA CROSSE** State **WI** Zip Code **54601-6252**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**300.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**07 / 07 / 2020**

**Transaction ID : SA11A.3158**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **100.00**

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

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

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

FOR LINE NUMBER: PAGE 11 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address 867 SHEFFIELD CT

City: NEKOOSA State: WI Zip Code: 54457-9198

FEC ID number of contributing federal political committee: C

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 550.00

Date of Receipt: 07 / 07 / 2020

Transaction ID : SA11A.3153

Amount of Each Receipt this Period: 100.00

Memo Item CONTRIBUTION

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

Mailing Address 225211 MAPLEWOOD DR.

City: WESTON State: WI Zip Code: 54476-7518

FEC ID number of contributing federal political committee: C

Name of Employer: C.T. GRAY INC. DBA CULVER'S Occupation: OWNER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

Date of Receipt: 07 / 07 / 2020

Transaction ID : SA11A.3125

Amount of Each Receipt this Period: 1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**HALDERSON, WENDELL, R., MR.,**

Mailing Address W6804 KEPPEL ROAD

City: HOLMEN State: WI Zip Code: 54636-9001

FEC ID number of contributing federal political committee: C

Name of Employer: RETIRED Occupation: MACHINIST

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 07 / 2020

Transaction ID : SA11A.3151

Amount of Each Receipt this Period: 50.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1150.00

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

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

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

FOR LINE NUMBER: PAGE 12 OF 114  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KEISER, MICHAEL, L., MR.,**

Mailing Address **2450 NORTH LAKEVIEW AVENUE**

City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60614-2878</b>
------------------------	--------------------	-------------------------------

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

Name of Employer <b>BDGR INC.</b>	Occupation <b>BUSINESS</b>
--------------------------------------	-------------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M M / D D / Y Y Y Y Y Y
07 / 07 / 2020

**Transaction ID : SA11A.3105**

Amount of Each Receipt this Period

Memo Item  
CONTRIBUTION

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

Mailing Address **402 PINE ISLAND LN.**

City <b>SCHOFIELD</b>	State <b>WI</b>	Zip Code <b>54476-1811</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>
------------------------------------	------------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M M / D D / Y Y Y Y Y Y
07 / 07 / 2020

**Transaction ID : SA11A.3116**

Amount of Each Receipt this Period

Memo Item  
CONTRIBUTION

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

Mailing Address **3300 WACO STREET**

City <b>TEXARKANA</b>	State <b>TX</b>	Zip Code <b>75501-6645</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>LEDWELL &amp; SONS</b>	Occupation <b>PRESIDENT</b>
---	--------------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M M / D D / Y Y Y Y Y Y
07 / 07 / 2020

**Transaction ID : SA11A.3119**

Amount of Each Receipt this Period

Memo Item  
CONTRIBUTION  
SEE REDESIGNATION

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

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 OF 114  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address 3300 WACO STREET

City TEXARKANA State TX Zip Code 75501-6645

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

Name of Employer LEDWELL & SONS Occupation PRESIDENT

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 13 / 2020

Transaction ID : SA11A.3120

Amount of Each Receipt this Period  
2200.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

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

Mailing Address 3300 WACO STREET

City TEXARKANA State TX Zip Code 75501-6645

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

Name of Employer LEDWELL & SONS Occupation PRESIDENT

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 13 / 2020

Transaction ID : SA11A.3126

Amount of Each Receipt this Period  
- 2200.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

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

Mailing Address 1930 WEST RIVER BEND COURT

City MEQUON State WI Zip Code 53092-2925

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 07 / 2020

Transaction ID : SA11A.3108

Amount of Each Receipt this Period  
200.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 200.00

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

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

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

FOR LINE NUMBER: PAGE 14 OF 114  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**LOFTSGAARDEN, TERESA, G., MRS.,**  
Mailing Address 4390 PARKWOOD DRIVE

City EAU CLAIRE State WI Zip Code 54703-2135

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

Name of Employer SACRED HEART HOSPITAL Occupation RN

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 07 / 2020

Transaction ID : SA11A.3123

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ROBSON, EDWARD, J., MR.,**  
Mailing Address 9532 EAST RIGGS ROAD

City SUN LAKES State AZ Zip Code 85248-7463

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

Name of Employer ROBSON COMMUNITIES Occupation CHAIRMAN

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 07 / 2020

Transaction ID : SA11A.3118

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SCHNEIDER, JERRY, , MR.,**  
Mailing Address 347 SOUTH FREEDOM LANE

City OXFORD State WI Zip Code 53952-9346

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 07 / 2020

Transaction ID : SA11A.3129

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 3000.00

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

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

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

FOR LINE NUMBER: PAGE 15 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WIESER, ANDREA, , MRS.,**  
 Mailing Address 31965 BUEHLER RIDGE ROAD  
 City LA CRESCENT State MN Zip Code 55947-4295  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 WIESER BROTHERS GENERAL CONTRACTOR BUSINESS ADMINISTRATOR  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 07 / 2020  
**Transaction ID : SA11A.3103**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**WIESER, BRIAN, D., MR.,**  
 Mailing Address 2494 COUNTY HWY. 6  
 City LA CRESCENT State MN Zip Code 55947-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 WIESER BROTHERS VICE PRESIDENT  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 07 / 2020  
**Transaction ID : SA11A.3104**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WILSEY, DIANE, B., MS.,**  
 Mailing Address 2590 JACKSON ST.  
 City SAN FRANCISCO State CA Zip Code 94115-1121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 A. WILSEY PROPERTIES CO. OWNER / CEO  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 07 / 2020  
**Transaction ID : SA11A.3117**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

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

3000.00

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

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

FOR LINE NUMBER: PAGE 16 OF 114  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
258553.95

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 07 2020

**Transaction ID : SA11C.302846**

Amount of Each Receipt this Period  
2800.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

Mailing Address 610 ROSECRANS STREET

City SAN DIEGO State CA Zip Code 92106-3439

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 07 2020

**Transaction ID : SA11A.3029**

Amount of Each Receipt this Period  
2800.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
258553.95

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 08 2020

**Transaction ID : SA11C.303556**

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

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

2800.00



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

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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address 546 SAN ANDRES DRIVE

City SOLANA BEACH State CA Zip Code 92075-2140

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

Name of Employer US GOVERNMENT Occupation DEPUTY OPERATIONS

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 08 2020

**Transaction ID : SA11A.3040**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

Memo Item  
**CONTRIBUTION**  
**EARMARKED FROM WINRED**

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 258553.95

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 09 2020

**Transaction ID : SA11C.304968**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item  
**CONTRIBUTION**  
**SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD**

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

Mailing Address 5121 E HOWARD LANE

City MANOR State TX Zip Code 78653-4032

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 09 2020

**Transaction ID : SA11A.3052**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item  
**CONTRIBUTION**  
**EARMARKED FROM WINRED**

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

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

\_\_\_\_\_ 1100.00

\_\_\_\_\_

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

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WINRED**  
 Mailing Address PO BOX 9891  
 City ARLINGTON State VA Zip Code 22219-1891  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼ 258553.95

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 09 2020  
**Transaction ID : SA11C.304970**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B.** Full Name (Last, First, Middle Initial)  
**BELLOCK, MARGARET, , MS.,**  
 Mailing Address 1030 3RD AVENUE SOUTH  
 City NAPLES State FL Zip Code 34102-6456  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 09 2020  
**Transaction ID : SA11A.3054**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
**CAIN, TEDD, , DR.,**  
 Mailing Address 3433 SOUTH SHORE DRIVE  
 City DELAVAN State WI Zip Code 53115-3504  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 GI ASSOCIATES GASTROENTEROLOGIST  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 10 2020  
**Transaction ID : SA11A.3285**  
 Amount of Each Receipt this Period  
 400.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► 1400.00  
**TOTAL** This Period (last page this line number only)..... ►

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

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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CRNECKIY, MARTIN, , MR., JR.**

Mailing Address 225 PHILLIP COURT

City KOHLER State WI Zip Code 53044-1358

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2020

Transaction ID : SA11A.3281

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**GASPAR, GEORGE, J., MR.,**

Mailing Address 11444 NORTH SHORECLIFF LANE

City MEQUON State WI Zip Code 53092-3524

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2020

Transaction ID : SA11A.3280

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

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

Mailing Address 1156 HIGHLAND POINTE DRIVE

City ST. LOUIS State MO Zip Code 63131-1408

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2020

Transaction ID : SA11A.3276

Amount of Each Receipt this Period  
2800.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3800.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RINEY, RODGER, O., MR.,**

Mailing Address 1156 HIGHLAND POINTE DRIVE

City ST. LOUIS State MO Zip Code 63131-1408

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2020

Transaction ID : SA11A.3275

Amount of Each Receipt this Period  
2800.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**VOGE BLACK, VICTORIA, M., MS.,**

Mailing Address 15068 FM 766

City GONZALES State TX Zip Code 78629-9113

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2020

Transaction ID : SA11A.3272

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WARE, ALLEN, R., MR.,**

Mailing Address 1116 E. CR 2270

City RIVIERA State TX Zip Code 78379-

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

Name of Employer SELF-EMPLOYED Occupation RESTAURATEUR

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2020

Transaction ID : SA11A.3277

Amount of Each Receipt this Period  
2800.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6100.00

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

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

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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
258553.95

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2020

**Transaction ID : SA11C.306283**

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

Mailing Address 820 LAGUNA HONDA BLVD

City SAN FRANCISCO State CA Zip Code 94127-1024

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

Name of Employer Occupation  
SAFTI PRESIDENT

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2020

**Transaction ID : SA11A.3067**

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
258553.95

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2020

**Transaction ID : SA11C.306284**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00

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

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

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

FOR LINE NUMBER: PAGE 22 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**STUTT, WILLIAM, , MR.,**  
 Mailing Address **455 COCONUT PALM ROAD**  
 City **VERO BEACH** State **FL** Zip Code **32963-3710**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **RETIRED** Occupation **RETIRED**  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2020  
**Transaction ID : SA11A.3068**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
**CONTRIBUTION**  
**EARMARKED FROM WINRED**

**B.** Full Name (Last, First, Middle Initial)  
**WINRED**  
 Mailing Address **PO BOX 9891**  
 City **ARLINGTON** State **VA** Zip Code **22219-1891**  
 FEC ID number of contributing federal political committee. **C C00694323**  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 258553.95

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2020  
**Transaction ID : SA11C.307291**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
**CONTRIBUTION**  
**SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD**

**C.** Full Name (Last, First, Middle Initial)  
**LLOYD, ROBERT, , MR.,**  
 Mailing Address **1156 FRASER WAY**  
 City **ONALASKA** State **WI** Zip Code **54650-2690**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **AS LLOYD RENTALS** Occupation **PROPERTY MANAGEMENT**  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2020  
**Transaction ID : SA11A.3075**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
**CONTRIBUTION**  
**EARMARKED FROM WINRED**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 23 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WINRED**  
 Mailing Address PO BOX 9891  
 City ARLINGTON State VA Zip Code 22219-1891  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 258553.95

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 12 / 2020  
**Transaction ID : SA11C.3086110**  
 Amount of Each Receipt this Period  
 2800.00  
 Memo Item CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B.** Full Name (Last, First, Middle Initial)  
**BREMER, LOUIS, , MR.,**  
 Mailing Address 17 HILLSIDE DR.  
 City GREENWICH State CT Zip Code 06830-4751  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CERBERUS CAPITAL MANAGEMENT INVESTOR  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 12 / 2020  
**Transaction ID : SA11A.3094**  
 Amount of Each Receipt this Period  
 2800.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
**WINRED**  
 Mailing Address PO BOX 9891  
 City ARLINGTON State VA Zip Code 22219-1891  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 258553.95

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 13 / 2020  
**Transaction ID : SA11C.3177202**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2800.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 24 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address 3245 SOUTH PINWOOD CREEK COURT

City NEW BERLIN State WI Zip Code 53151-4381

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 13 / 2020

Transaction ID : SA11A.3185

Amount of Each Receipt this Period  
 100.00

Memo Item  
 CONTRIBUTION  
 EARMARKED FROM WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 258553.95

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 13 / 2020

Transaction ID : SA11C.3177207

Amount of Each Receipt this Period  
 250.00

Memo Item  
 CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS  
 ABOVE ITEMIZATION THRESHOLD

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

Mailing Address 3131 HOWRY STREET

City LA CROSSE State WI Zip Code 54603-1087

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

Name of Employer LA CROSSE INSURANCE AGENCY Occupation PRESIDENT

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 13 / 2020

Transaction ID : SA11A.3190

Amount of Each Receipt this Period  
 250.00

Memo Item  
 CONTRIBUTION  
 EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 350.00

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



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

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

FOR LINE NUMBER: PAGE 25 OF 114  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
258553.95

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 13 / 2020

**Transaction ID : SA11C.3177208**

Amount of Each Receipt this Period  
5600.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

Mailing Address 268 SOUTH COTTAGE HILL AVENUE

City ELMHURST State IL Zip Code 60126-3333

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

Name of Employer Occupation  
THE JEL SERT COMPANY PRESIDENT

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 14 / 2020

**Transaction ID : SA11A.3198**

Amount of Each Receipt this Period  
- 2800.00

Memo Item CONTRIBUTION

REDESIGNATION TO GENERAL

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

Mailing Address 268 SOUTH COTTAGE HILL AVENUE

City ELMHURST State IL Zip Code 60126-3333

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

Name of Employer Occupation  
THE JEL SERT COMPANY PRESIDENT

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 14 / 2020

**Transaction ID : SA11A.3199**

Amount of Each Receipt this Period  
2800.00

Memo Item CONTRIBUTION

REDESIGNATION FROM PRIMARY

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER: PAGE 26 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address 268 SOUTH COTTAGE HILL AVENUE

City: ELMHURST State: IL Zip Code: 60126-3333

FEC ID number of contributing federal political committee: C

Name of Employer: THE JEL SERT COMPANY Occupation: PRESIDENT

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt: 07 / 13 / 2020

Transaction ID : SA11A.3191

Amount of Each Receipt this Period: 5600.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED; SEE REDESIGNATION

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

Mailing Address PO BOX 9891

City: ARLINGTON State: VA Zip Code: 22219-1891

FEC ID number of contributing federal political committee: C C00694323

Name of Employer: Occupation:

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
258553.95

Date of Receipt: 07 / 13 / 2020

Transaction ID : SA11C.3177211

Amount of Each Receipt this Period: 1000.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

Mailing Address 1880 CENTURY PARK EAST #1600

City: LOS ANGELES State: CA Zip Code: 90067-1661

FEC ID number of contributing federal political committee: C

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt: 07 / 13 / 2020

Transaction ID : SA11A.3194

Amount of Each Receipt this Period: 1000.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6600.00

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

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

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

FOR LINE NUMBER: PAGE 27 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address 2802 COLUMBUS LAKE RD  
PO BOX 579

City EAGLE RIVER State WI Zip Code 54521-9214

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

Name of Employer NATURE Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 14 / 2020

Transaction ID : SA11A.3394

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

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

Mailing Address W224 N4557 SEVEN OAKS DR.

City PEWAUKEE State WI Zip Code 53072-

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 14 / 2020

Transaction ID : SA11A.3409

Amount of Each Receipt this Period  
200.00

Memo Item CONTRIBUTION

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

Mailing Address 3205 W. COUNTY LINE RD.

City MILWAUKEE State WI Zip Code 53217-1006

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 14 / 2020

Transaction ID : SA11A.3399

Amount of Each Receipt this Period  
200.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 900.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 114	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GORENSTEIN, RALPH, G., MR.,**

Mailing Address PO BOX 511190

City MILWAUKEE	State WI	Zip Code 53203-0201
-------------------	-------------	------------------------

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

Name of Employer BELL PROPERTY MANAGEMENT	Occupation REAL ESTATE MANAGEMENT
--	--------------------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2020

**Transaction ID : SA11A.3404**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 400.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**GREENE, LAWRENCE, C., MR.,**

Mailing Address 46 GOODNOW RD

City PRINCETON	State MA	Zip Code 01541-1602
-------------------	-------------	------------------------

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

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2020

**Transaction ID : SA11A.3452**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**HASSEY, ROBERT, J., MR.,**

Mailing Address 5217 EAST WIND LAKE ROAD

City UNION GROVE	State WI	Zip Code 53182-9654
---------------------	-------------	------------------------

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

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2020

**Transaction ID : SA11A.3456**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 200.00

Memo Item  
CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 29 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HENDRICKS, DIANE, M., MS.,**  
Mailing Address P.O. BOX 65

City: AFTON State: WI Zip Code: 53501-0065

FEC ID number of contributing federal political committee: C

Name of Employer: HENDRICKS HOLDING CO., INC. Occupation: CHAIRMAN

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 5600.00

Date of Receipt: 07 / 14 / 2020  
Transaction ID : SA11A.3400

Amount of Each Receipt this Period: 2800.00

Memo Item  
CONTRIBUTION  
SEE REDESIGNATION

**B.** Full Name (Last, First, Middle Initial)  
**HENDRICKS, DIANE, M., MS.,**  
Mailing Address P.O. BOX 65

City: AFTON State: WI Zip Code: 53501-0065

FEC ID number of contributing federal political committee: C

Name of Employer: HENDRICKS HOLDING CO., INC. Occupation: CHAIRMAN

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 5600.00

Date of Receipt: 07 / 20 / 2020  
Transaction ID : SA11A.3415

Amount of Each Receipt this Period: 2800.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**HENDRICKS, DIANE, M., MS.,**  
Mailing Address P.O. BOX 65

City: AFTON State: WI Zip Code: 53501-0065

FEC ID number of contributing federal political committee: C

Name of Employer: HENDRICKS HOLDING CO., INC. Occupation: CHAIRMAN

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 5600.00

Date of Receipt: 07 / 20 / 2020  
Transaction ID : SA11A.3415B

Amount of Each Receipt this Period: -2800.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 2800.00

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

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

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

FOR LINE NUMBER: PAGE 30 OF 114  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**INDGJER, LISA, J., MS.,**

Mailing Address 3221 SOUTH LAPRAIRIE TOWN HALL ROA

City JANESVILLE State WI Zip Code 53546-8783

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

Name of Employer ABC SUPPLY CO. Occupation VP - HR

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 14 / 2020

**Transaction ID : SA11A.3403**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

Mailing Address 1930 WEST RIVER BEND COURT

City MEQUON State WI Zip Code 53092-2925

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 14 / 2020

**Transaction ID : SA11A.3405**

Amount of Each Receipt this Period  
200.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MODE, JAMES, R., MR.,**

Mailing Address W6691 KIESLING ROAD

City JEFFERSON State WI Zip Code 53549-9609

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 14 / 2020

**Transaction ID : SA11A.3410**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 114	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PAVLAC-KONIECZNY, DIANNE, L., MRS.,**

Mailing Address 8740 W MELODY LN

City GREENFIELD	State WI	Zip Code 53228-3440
--------------------	-------------	------------------------

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

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2020

**Transaction ID : SA11A.3455**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SCHLOEMER, JAMES, H., MR.,**

Mailing Address W134 N8675 EXECUTIVE PARKWAY

City MENOMONEE FALLS	State WI	Zip Code 53051-
-------------------------	-------------	--------------------

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

Name of Employer CONTINENTAL PROPERTIES CO., INC.	Occupation CEO
--	-------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 3800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2020

**Transaction ID : SA11A.3406**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2800.00

Memo Item  
CONTRIBUTION  
SEE REDESIGNATION

**C.** Full Name (Last, First, Middle Initial)  
**SCHLOEMER, JAMES, H., MR.,**

Mailing Address W134 N8675 EXECUTIVE PARKWAY

City MENOMONEE FALLS	State WI	Zip Code 53051-
-------------------------	-------------	--------------------

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

Name of Employer CONTINENTAL PROPERTIES CO., INC.	Occupation CEO
--	-------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 3800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2020

**Transaction ID : SA11A.4137**

Amount of Each Receipt this Period  
 \_\_\_\_\_ - 1000.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

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

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

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

FOR LINE NUMBER: PAGE 32 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SCHLOEMER, JAMES, H., MR.,**  
 Mailing Address **W134 N8675 EXECUTIVE PARKWAY**  
 City **MENOMONEE FALLS** State **WI** Zip Code **53051-**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **CONTINENTAL PROPERTIES CO., INC.** Occupation **CEO**  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
**3800.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 14 / 2020**  
**Transaction ID : SA11A.4138**  
 Amount of Each Receipt this Period  
**1000.00**  
 Memo Item  
**CONTRIBUTION**  
**REDESIGNATION FROM PRIMARY**

**B.** Full Name (Last, First, Middle Initial)  
**SPEAKER, TIMOTHY, J., MR.,**  
 Mailing Address **8121 WEST BONNIWELL ROAD**  
 City **MEQUON** State **WI** Zip Code **53097-2001**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **J.W. SPEAKER CORP.** Occupation **OWNER**  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 14 / 2020**  
**Transaction ID : SA11A.3398**  
 Amount of Each Receipt this Period  
**250.00**  
 Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**TOENJES, WAYNE, A., MR., MR.**  
 Mailing Address **232324 FLINTS ROAD**  
 City **WAUSAU** State **WI** Zip Code **54401-4583**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **MAJOR INDUSTRIES** Occupation **MANAGEMENT**  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 14 / 2020**  
**Transaction ID : SA11A.3393**  
 Amount of Each Receipt this Period  
**500.00**  
 Memo Item  
**CONTRIBUTION**

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



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

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

FOR LINE NUMBER: PAGE 33 OF 114  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WHITE, MICHAEL, R., MR.,**

Mailing Address **3787 CAMPBELL TRACE ROAD**

City <b>HARTLAND</b>	State <b>WI</b>	Zip Code <b>53029-8826</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>
------------------------------------	------------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2020

**Transaction ID : SA11A.3411**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item  
**CONTRIBUTION**

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

Mailing Address **PO BOX 9891**

City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22219-1891</b>
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FEC ID number of contributing federal political committee. **C C00694323**

Name of Employer	Occupation
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Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 258553.95

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2020

**Transaction ID : SA11C.3201224**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item  
**CONTRIBUTION**

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

Mailing Address **611 W RIVER ROAD**

City <b>APPLETON</b>	State <b>WI</b>	Zip Code <b>54915-1258</b>
-------------------------	--------------------	-------------------------------

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

Name of Employer <b>PLEXUS</b>	Occupation <b>EXECUTIVE</b>
-----------------------------------	--------------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2020

**Transaction ID : SA11A.3207**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item  
**CONTRIBUTION**

EARMARKED FROM WINRED

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

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

\_\_\_\_\_ 1250.00

\_\_\_\_\_

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

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

FOR LINE NUMBER: PAGE 34 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WINRED**  
 Mailing Address **PO BOX 9891**  
 City **ARLINGTON** State **VA** Zip Code **22219-1891**  
 FEC ID number of contributing federal political committee. **C C00694323**  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
**258553.95**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 14 / 2020**  
**Transaction ID : SA11C.3201231**  
 Amount of Each Receipt this Period  
**1000.00**  
 Memo Item  
**CONTRIBUTION**  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B.** Full Name (Last, First, Middle Initial)  
**VOSS, KURT, , MR.,**  
 Mailing Address **3585 BEACHMONT ROAD**  
 City **DE PERE** State **WI** Zip Code **54115-5503**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
**AMERILUX INTERNATIONAL** **CEO**  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 14 / 2020**  
**Transaction ID : SA11A.3214**  
 Amount of Each Receipt this Period  
**1000.00**  
 Memo Item  
**CONTRIBUTION**  
**EARMARKED FROM WINRED**

**C.** Full Name (Last, First, Middle Initial)  
**WINRED**  
 Mailing Address **PO BOX 9891**  
 City **ARLINGTON** State **VA** Zip Code **22219-1891**  
 FEC ID number of contributing federal political committee. **C C00694323**  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
**258553.95**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 14 / 2020**  
**Transaction ID : SA11C.3201232**  
 Amount of Each Receipt this Period  
**2800.00**  
 Memo Item  
**CONTRIBUTION**  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

**1000.00**  
**1000.00**

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

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

FOR LINE NUMBER: PAGE 35 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address 141 W. JACKSON  
STE. 1502N

City CHICAGO State IL Zip Code 60604-2992

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

Name of Employer ENDURANCE ASSET MANAGEMENT Occupation INVESTOR

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 14 / 2020

Transaction ID : SA11A.3215

Amount of Each Receipt this Period  
2800.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
258553.95

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 14 / 2020

Transaction ID : SA11C.3201237

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION  
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

Mailing Address 125 QUASSAICK AVENUE

City NEW WINDSOR State NY Zip Code 12553-6635

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 14 / 2020

Transaction ID : SA11A.3220

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

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

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

3800.00

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

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

FOR LINE NUMBER: PAGE 36 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address 1010 NORTH CASS STREET

City MILWAUKEE State WI Zip Code 53202-3356

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

Name of Employer SELF Occupation BROKER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2020

**Transaction ID : SA11A.3389**

Amount of Each Receipt this Period  
200.00

Memo Item CONTRIBUTION

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
258553.95

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2020

**Transaction ID : SA11C.3233258**

Amount of Each Receipt this Period  
25.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

Mailing Address 720 CLEVELAND STREET

City FENNIMORE State WI Zip Code 53809-1516

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2020

**Transaction ID : SA11A.3241**

Amount of Each Receipt this Period  
25.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 225.00

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

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

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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address **PO BOX 9891**

City **ARLINGTON** State **VA** Zip Code **22219-1891**

FEC ID number of contributing federal political committee. **C C00694323**

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**258553.95**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 15 / 2020**

**Transaction ID : SA11C.3233259**

Amount of Each Receipt this Period  
**25.00**

Memo Item  
**CONTRIBUTION**

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

Mailing Address **720 CLEVELAND STREET**

City **FENNIMORE** State **WI** Zip Code **53809-1516**

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

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**230.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 15 / 2020**

**Transaction ID : SA11A.3242**

Amount of Each Receipt this Period  
**25.00**

Memo Item  
**CONTRIBUTION**

EARMARKED FROM WINRED

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

Mailing Address **PO BOX 9891**

City **ARLINGTON** State **VA** Zip Code **22219-1891**

FEC ID number of contributing federal political committee. **C C00694323**

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**258553.95**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 15 / 2020**

**Transaction ID : SA11C.3233271**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

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

**25.00**

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 38 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address N9889 RIDGE RD

City: HIXTON State: WI Zip Code: 54635-8500

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

Name of Employer: GLOBAL FINISHING SOLUTIONS Occupation: ELECTRICAL PANEL BUILDER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt: 07 / 15 / 2020

Transaction ID : SA11A.3254

Amount of Each Receipt this Period: 500.00

Memo Item CONTRIBUTION  
EARMARKED FROM WINRED

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

Mailing Address PO BOX 9891

City: ARLINGTON State: VA Zip Code: 22219-1891

FEC ID number of contributing federal political committee: **C** C00694323

Name of Employer: Occupation:

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
258553.95

Date of Receipt: 07 / 15 / 2020

Transaction ID : SA11C.3233272

Amount of Each Receipt this Period: 500.00

Memo Item CONTRIBUTION  
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

Mailing Address 3009 PARKWAY DRIVE

City: STEVENS POINT State: WI Zip Code: 54481-5082

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

Name of Employer: EXOS Occupation: PHYSICAL THERAPIST

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt: 07 / 15 / 2020

Transaction ID : SA11A.3255

Amount of Each Receipt this Period: 500.00

Memo Item CONTRIBUTION  
EARMARKED FROM WINRED

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

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

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 39 OF 114  
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 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address **PO BOX 9891**

City **ARLINGTON** State **VA** Zip Code **22219-1891**

FEC ID number of contributing federal political committee. **C C00694323**

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**258553.95**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**07 15 2020**

**Transaction ID : SA11C.3233273**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION  
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

Mailing Address **6632 KENTWOOD BLUFFS DRIVE**

City **LOS ANGELES** State **CA** Zip Code **90045-1259**

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

Name of Employer Occupation  
**SELF-EMPLOYED INVESTOR**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**1000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**07 15 2020**

**Transaction ID : SA11A.3256**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION  
EARMARKED FROM WINRED

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

Mailing Address **PO BOX 9891**

City **ARLINGTON** State **VA** Zip Code **22219-1891**

FEC ID number of contributing federal political committee. **C C00694323**

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**258553.95**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**07 15 2020**

**Transaction ID : SA11C.3233274**

Amount of Each Receipt this Period  
**250.00**

Memo Item CONTRIBUTION  
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

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

**1000.00**

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

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

FOR LINE NUMBER: PAGE 40 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HARSH, JON, , MR.,**  
Mailing Address **385 LEGEND VIEW**

City **WALES** State **WI** Zip Code **53183-9548**

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

Name of Employer **CRG** Occupation **RESEARCH ASSIST.**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 15 / 2020**

**Transaction ID : SA11A.3257**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**  
**EARMARKED FROM WINRED**

**B.** Full Name (Last, First, Middle Initial)  
**BUSCH, AUGUST, A., MR., III**  
Mailing Address **ONE MID RIVERS MALL DR  
SUITE 210**

City **ST. PETERS** State **MO** Zip Code **63376-4322**

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

Name of Employer **RETIRED EXECUTIVE** Occupation **RETIRED EXECUTIVE**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 16 / 2020**

**Transaction ID : SA11A.3512**

Amount of Each Receipt this Period  
**2500.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**GELATT, CHARLES, D., MR.,**  
Mailing Address **3159 EDGEWATER DRIVE**

City **LA CROSSE** State **WI** Zip Code **54603-1090**

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

Name of Employer **NMT CORPORATION** Occupation **MANAGER**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **2800.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 16 / 2020**

**Transaction ID : SA11A.3476**

Amount of Each Receipt this Period  
**2800.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **5550.00**

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



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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 41 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GREENHECK, ROBERT, C., MR.,**  
 Mailing Address 4021 CAMP PHILLIPS ROAD  
 City WESTON State WI Zip Code 54476-1560  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GREENHECK FAN CORP Occupation CHAIRMAN EMERITUS  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2020  
**Transaction ID : SA11A.3516**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**HALDERSON, WENDELL, R., MR.,**  
 Mailing Address W6804 KEPPEL ROAD  
 City HOLMEN State WI Zip Code 54636-9001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation MACHINIST  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2020  
**Transaction ID : SA11A.3485**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**HARRINGTON, THOMAS, R., MR.,**  
 Mailing Address 14000 NORTH BIRCHWOOD LANE  
 City MEQUON State WI Zip Code 53097-1706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NATIONAL TECHNOLOGIES, INC. Occupation BUSINESS OWNER  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2020  
**Transaction ID : SA11A.3514**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
**CONTRIBUTION**

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

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

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

FOR LINE NUMBER: PAGE 42 OF 114  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HENDERSIN, NORMAN, R., MR.,**

Mailing Address 1112 NORTH CHESTER STREET

City SPARTA State WI Zip Code 54656-1214

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 16 / 2020

**Transaction ID : SA11A.3484**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**WERTH, RICHARD, R., MR.,**

Mailing Address 1231 SOUTH 54TH STREET

City WEST MILWAUKEE State WI Zip Code 53214-3402

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
225.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 16 / 2020

**Transaction ID : SA11A.3501**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WERTH, RICHARD, R., MR.,**

Mailing Address 1231 SOUTH 54TH STREET

City WEST MILWAUKEE State WI Zip Code 53214-3402

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
225.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 16 / 2020

**Transaction ID : SA11A.3513**

Amount of Each Receipt this Period  
200.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 475.00

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

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

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

FOR LINE NUMBER: PAGE 43 OF 114  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
258553.95

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 17 / 2020

**Transaction ID : SA11C.3304338**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

Mailing Address 17120 EAST FAIRWAY COURT

City FOUNTAIN HILLS State AZ Zip Code 85268-5709

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 17 / 2020

**Transaction ID : SA11A.3328**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
258553.95

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 18 / 2020

**Transaction ID : SA11C.3305368**

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

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

1000.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 44 OF 114	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address **2205 PEMBROOKE PLACE**

City <b>DENTON</b>	State <b>TX</b>	Zip Code <b>76205-8263</b>
-----------------------	--------------------	-------------------------------

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

Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>
------------------------------------	------------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**300.00**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
07 / 18 / 2020

**Transaction ID : SA11A.3357**

Amount of Each Receipt this Period  

100.00
--------

Memo Item  
**CONTRIBUTION**  
**EARMARKED FROM WINRED**

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

Mailing Address **PO BOX 9891**

City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22219-1891</b>
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C C00694323**

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**258553.95**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
07 / 18 / 2020

**Transaction ID : SA11C.3305369**

Amount of Each Receipt this Period  

100.00
--------

Memo Item  
**CONTRIBUTION**  
**SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD**

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

Mailing Address **2205 PEMBROOKE PLACE**

City <b>DENTON</b>	State <b>TX</b>	Zip Code <b>76205-8263</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>
------------------------------------	------------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**300.00**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
07 / 18 / 2020

**Transaction ID : SA11A.3358**

Amount of Each Receipt this Period  

100.00
--------

Memo Item  
**CONTRIBUTION**  
**EARMARKED FROM WINRED**

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

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

200.00
--------

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

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

FOR LINE NUMBER: PAGE 45 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
258553.95

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2020

**Transaction ID : SA11C.3305371**

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

Mailing Address 700 GENEVA PKWY

City LAKE GENEVA State WI Zip Code 53147-4594

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

Name of Employer Occupation  
DIXON COMPANIES INC COMMERCIAL REAL ESTATE

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2020

**Transaction ID : SA11A.3360**

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
**VAN ORDEN, SARA, , MRS.,**

Mailing Address N3199 850TH ST

City HAGER CITY State WI Zip Code 54014-8225

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
346.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 19 / 2020

**Transaction ID : SA11A.3310**

Amount of Each Receipt this Period  
30.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 530.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 46 OF 114	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer	Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
258553.95

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 20 / 2020

**Transaction ID : SA11C.3416440**

Amount of Each Receipt this Period  
50.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

Mailing Address 34730 NE 82ND PL

City CARNATION	State WA	Zip Code 98014-6873
-------------------	-------------	------------------------

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

Name of Employer MICROSOFT	Occupation SOFTWARE ENGINEER
-------------------------------	---------------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 20 / 2020

**Transaction ID : SA11A.3425**

Amount of Each Receipt this Period  
50.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer	Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
258553.95

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 20 / 2020

**Transaction ID : SA11C.3416441**

Amount of Each Receipt this Period  
50.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	50.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 47 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address 34730 NE 82ND PL

City CARNATION State WA Zip Code 98014-6873

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

Name of Employer MICROSOFT Occupation SOFTWARE ENGINEER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2020

**Transaction ID : SA11A.3426**

Amount of Each Receipt this Period  
 50.00

Memo Item  
 CONTRIBUTION  
 EARMARKED FROM WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 258553.95

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2020

**Transaction ID : SA11C.3416445**

Amount of Each Receipt this Period  
 11200.00

Memo Item  
 CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS  
 ABOVE ITEMIZATION THRESHOLD

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

Mailing Address 800 SOUTH POINTE DRIVE

City MIAMI BEACH State FL Zip Code 33139-7163

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

Name of Employer HALP Occupation INV MGMT

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2020

**Transaction ID : SA11A.3442**

Amount of Each Receipt this Period  
 - 2800.00

Memo Item  
 CONTRIBUTION  
 REDESIGNATION TO GENERAL

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 50.00

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

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

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

FOR LINE NUMBER: PAGE 48 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**FRANKE, JAY, , MR.,**  
 Mailing Address 800 SOUTH POINTE DRIVE  
 City MIAMI BEACH State FL Zip Code 33139-7163  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PERFORMING ARTS  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2020  
**Transaction ID : SA11A.3440**  
 Amount of Each Receipt this Period  
 5600.00  
 Memo Item  
 CONTRIBUTION  
 REATTRIBUTION FROM SPOUSE;

**B.** Full Name (Last, First, Middle Initial)  
**HERRO, DAVID, , MR.,**  
 Mailing Address 800 SOUTH POINTE DRIVE  
 City MIAMI BEACH State FL Zip Code 33139-7163  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HALP Occupation INV MGMT  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2020  
**Transaction ID : SA11A.3441**  
 Amount of Each Receipt this Period  
 - 5600.00  
 Memo Item  
 CONTRIBUTION  
 REATTRIBUTION TO SPOUSE;

**C.** Full Name (Last, First, Middle Initial)  
**HERRO, DAVID, , MR.,**  
 Mailing Address 800 SOUTH POINTE DRIVE  
 City MIAMI BEACH State FL Zip Code 33139-7163  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HALP Occupation INV MGMT  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2020  
**Transaction ID : SA11A.3443**  
 Amount of Each Receipt this Period  
 2800.00  
 Memo Item  
 CONTRIBUTION  
 REDESIGNATION FROM PRIMARY;

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

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

FOR LINE NUMBER: PAGE 49 OF 114  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address 800 SOUTH POINTE DRIVE

City MIAMI BEACH State FL Zip Code 33139-7163

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

Name of Employer HALP Occupation INV MGMT

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 20 / 2020

**Transaction ID : SA11A.3430**

Amount of Each Receipt this Period  
11200.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED; SEE REATTRIBUTION; SEE REDESIGNATION

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

Mailing Address 1531 EL CERRITO DRIVE

City THOUSAND OAKS State CA Zip Code 91362-2111

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2020

**Transaction ID : SA11A.3575**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ATWELL, SALLY, J., MRS.,**

Mailing Address 920 MEMORIAL DR.

City STURGEON BAY State WI Zip Code 54235-1860

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2020

**Transaction ID : SA11A.3580**

Amount of Each Receipt this Period  
2800.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 14500.00

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

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

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

FOR LINE NUMBER: PAGE 50 OF 114  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BARRY, JEAN, M., MS.,**

Mailing Address **55 WEST MONROE STREET  
SUITE 2540**

City **CHICAGO** State **IL** Zip Code **60603-5028**

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

Name of Employer **MCKEE FAMILY FOUNDATION** Occupation **CEO**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**500.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**07 / 21 / 2020**

**Transaction ID : SA11A.3594**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

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

Mailing Address **1111 WEST PROSPECT STREET**

City **DURAND** State **WI** Zip Code **54736-1061**

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

Name of Employer **BAUER BUILT, INC.** Occupation **CEO/CHAIRMAN/BOARD**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**1000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**07 / 21 / 2020**

**Transaction ID : SA11A.3564**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**BERG, TROY, L., DR.,**

Mailing Address **3720 GLEN CREST CT**

City **EAU CLAIRE** State **WI** Zip Code **54701-5615**

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

Name of Employer **OAKLEAF SURGICAL HOSPITAL** Occupation **ORTHOPEDIC SURGEON**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**250.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**07 / 21 / 2020**

**Transaction ID : SA11A.3577**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

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

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

**1750.00**

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

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

FOR LINE NUMBER: PAGE 51 OF 114  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BURBACH, CONNIE, J., MS.,**

Mailing Address 125 E. HOLUM ST.  
APT. 303

City DEFOREST State WI Zip Code 53532-1176

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFF INFORMATION REQUESTED PER BEST EFF

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2020

Transaction ID : SA11A.3647

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CHERNICK, RICHARD, J., MR.,**

Mailing Address 1276 QUAIL RIDGE DR.

City ONEIDA State WI Zip Code 54155-8659

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

Name of Employer Occupation  
CAMERA CORNER CEO

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2020

Transaction ID : SA11A.3579

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DANNEKER, JOHN, R., MR.,**

Mailing Address N478 - 244TH ST.  
P.O. BOX 38

City MAIDEN ROCK State WI Zip Code 54750-0038

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2020

Transaction ID : SA11A.3630

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 1600.00

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

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

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

FOR LINE NUMBER: PAGE 52 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**FOHEY, BRIAN, T., MR.,**  
Mailing Address 4529 118TH ST.  
  
City PLEASANT PRAIRIE State WI Zip Code 53158-3909  
  
FEC ID number of contributing federal political committee. **C**  
  
Name of Employer ABBVIE Occupation MANAGER  
  
Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
  
Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2020  
**Transaction ID : SA11A.3733**  
  
Amount of Each Receipt this Period  
250.00  
  
 Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**HENRICHS, CAROL, A., MRS.,**  
Mailing Address 13403 EDGE WOOD LANE  
  
City HIGHLAND State IL Zip Code 62249-3049  
  
FEC ID number of contributing federal political committee. **C**  
  
Name of Employer RETIRED Occupation REGISTERED NURSE - RETIRED  
  
Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
  
Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2020  
**Transaction ID : SA11A.3572**  
  
Amount of Each Receipt this Period  
500.00  
  
 Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**KABARA, BETTY, Z., MS.,**  
Mailing Address 405 WEST WACHTER ROAD  
  
City GALENA State IL Zip Code 61036-8600  
  
FEC ID number of contributing federal political committee. **C**  
  
Name of Employer MED-CHEM LABS Occupation PRESIDENT AND CEO  
  
Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
  
Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2020  
**Transaction ID : SA11A.3585**  
  
Amount of Each Receipt this Period  
3000.00  
  
 Memo Item  
CONTRIBUTION  
SEE REDESIGNATION

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

3750.00

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

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

FOR LINE NUMBER: PAGE 53 OF 114  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KABARA, BETTY, Z., MS.,**  
Mailing Address 405 WEST WACHTER ROAD

City GALENA	State IL	Zip Code 61036-8600
----------------	-------------	------------------------

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

Name of Employer MED-CHEM LABS	Occupation PRESIDENT AND CEO
-----------------------------------	---------------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2020

**Transaction ID : SA11A.3595**

Amount of Each Receipt this Period  
- 200.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**KABARA, BETTY, Z., MS.,**  
Mailing Address 405 WEST WACHTER ROAD

City GALENA	State IL	Zip Code 61036-8600
----------------	-------------	------------------------

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

Name of Employer MED-CHEM LABS	Occupation PRESIDENT AND CEO
-----------------------------------	---------------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2020

**Transaction ID : SA11A.3596**

Amount of Each Receipt this Period  
200.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**KEMPE, WILLIAM, E., MR.,**  
Mailing Address 410 FRENETTE DR.  
APT. 3

City CHIPPEWA FALLS	State WI	Zip Code 54729-3577
------------------------	-------------	------------------------

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

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2020

**Transaction ID : SA11A.3649**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

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

500.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 OF 114  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KOLBER, PATRICIA, B., MRS.,**

Mailing Address **2245 NORTH MAGNOLIA AVENUE**

City **CHICAGO** State **IL** Zip Code **60614-3103**

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

Name of Employer **RESIDUAL BASED FINANCE CORP.** Occupation **HUMAN RESOURCE ADMINISTRATOR**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**2800.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**07 / 21 / 2020**

**Transaction ID : SA11A.3591**

Amount of Each Receipt this Period  
**2800.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**KOLBER, VINCENT, A., MR.,**

Mailing Address **2245 N. MAGNOLIA AVENUE**

City **CHICAGO** State **IL** Zip Code **60614-3103**

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

Name of Employer **RESIDEO** Occupation **CHAIRMAN**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**4800.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**07 / 21 / 2020**

**Transaction ID : SA11A.3592**

Amount of Each Receipt this Period  
**2800.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**KRAFT, ROBERT, W., MR.,**

Mailing Address **311 EAST CHICAGO STREET**

City **MILWAUKEE** State **WI** Zip Code **53202-5896**

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

Name of Employer **FIRST PATHWAY PARTNERS** Occupation **CHAIRMAN AND CEO**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**2000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**07 / 21 / 2020**

**Transaction ID : SA11A.3568**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **6600.00**

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

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

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

FOR LINE NUMBER: PAGE 55 OF 114  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address 923 E. KILBOURN AVE.

City MILWAUKEE	State WI	Zip Code 53202-3493
-------------------	-------------	------------------------

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

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2020

**Transaction ID : SA11A.3583**

Amount of Each Receipt this Period  
200.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**LORENZ, ERIC, J., MR.,**

Mailing Address 9801 NORTH HILLTOP LANE

City MEQUON	State WI	Zip Code 53092-5357
----------------	-------------	------------------------

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

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2020

**Transaction ID : SA11A.3582**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

Mailing Address 2807 SOUTH BROWNS LAKE DRIVE

City BURLINGTON	State WI	Zip Code 53105-7956
--------------------	-------------	------------------------

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

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2020

**Transaction ID : SA11A.3581**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	1450.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 56 OF 114  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address 55 N. OAK ST.  
APT. 15

City PLATTEVILLE State WI Zip Code 53818-2660

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 21 2020

Transaction ID : SA11A.3824

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

Mailing Address 7815 VOLKMAN STREET

City ROTHSCHILD State WI Zip Code 54474-1261

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

Name of Employer INCREDIBLE BANK Occupation EXECUTIVE

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 21 2020

Transaction ID : SA11A.3590

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PEDERSON, TIMOTHY, G., MR.,**

Mailing Address PO BOX 260

City HARTLAND State WI Zip Code 53029-0260

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

Name of Employer DRS Occupation SALES

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 21 2020

Transaction ID : SA11A.3588

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 2750.00

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



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

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

FOR LINE NUMBER: PAGE 57 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address 13876 ASH LANE

City BUTTERNUT State WI Zip Code 54514-8685

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2020

**Transaction ID : SA11A.3618**

Amount of Each Receipt this Period  
 200.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SCHUBERT, KRIS, F., MR.,**

Mailing Address W5278 EAST POINT RD

City WEST SALEM State WI Zip Code 54669-9320

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

Name of Employer SCHUBERT BROS. Occupation PEST CONTROL

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2020

**Transaction ID : SA11A.3701**

Amount of Each Receipt this Period  
 100.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SCHWANKL, RICHARD, B., MR.,**

Mailing Address 2621 FROSTWOODS ST.

City EAU CLAIRE State WI Zip Code 54703-1282

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **900.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2020

**Transaction ID : SA11A.3598**

Amount of Each Receipt this Period  
 400.00

Memo Item CONTRIBUTION

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 114	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SEMBLER, MEL, F., AMBASSADOR,**

Mailing Address 5858 CENTRAL AVENUE

City ST. PETERSBURG	State FL	Zip Code 33707-1720
------------------------	-------------	------------------------

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

Name of Employer THE SEMBLER COMPANY	Occupation REAL ESTATE DEVELOPER
---	-------------------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2020

**Transaction ID : SA11A.3574**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

Mailing Address 120 VIA DEL LAGO

City PALM BEACH	State FL	Zip Code 33480-4917
--------------------	-------------	------------------------

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

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2020

**Transaction ID : SA11A.3565**

Amount of Each Receipt this Period  
5600.00

Memo Item  
CONTRIBUTION  
SEE REDESIGNATION

**C.** Full Name (Last, First, Middle Initial)  
**SMITH, HAROLD, B., MR.,**

Mailing Address 120 VIA DEL LAGO

City PALM BEACH	State FL	Zip Code 33480-4917
--------------------	-------------	------------------------

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

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2020

**Transaction ID : SA11A.3566**

Amount of Each Receipt this Period  
- 2800.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 59 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SMITH, HAROLD, B., MR.,**  
Mailing Address 120 VIA DEL LAGO  
City PALM BEACH State FL Zip Code 33480-4917  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2020  
Transaction ID : SA11A.3567  
Amount of Each Receipt this Period  
2800.00  
 Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**SORENSEN, ANITA, M., MS.,**  
Mailing Address 3076 EDENBERRY ST  
City FITCHBURG State WI Zip Code 53711-6955  
FEC ID number of contributing federal political committee. **C**  
Name of Employer FOLEY & LARDNER, LLP Occupation ATTORNEY  
Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2020  
Transaction ID : SA11A.3616  
Amount of Each Receipt this Period  
240.00  
 Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**THOMPSON, ROGER, V., MR.,**  
Mailing Address N35545 SCHANSBERG RD  
City WHITEHALL State WI Zip Code 54773-9116  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SELF-EMPLOYED Occupation FARMER  
Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2020  
Transaction ID : SA11A.3648  
Amount of Each Receipt this Period  
500.00  
 Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 740.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 60 OF 114  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**UTTECH, JOHN, D., MR.,**

Mailing Address 1320 GOLDENROD WAY

City OCONOMOWOC State WI Zip Code 53066-3024

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2020

Transaction ID : SA11A.3560

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**WIESER, DANIEL, J., MR.,**

Mailing Address W3322 390TH AVE.

City MAIDEN ROCK State WI Zip Code 54750-8005

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

Name of Employer WIESER CONCRETE PRODUCTS INC. Occupation ACCT. CLERK

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2020

Transaction ID : SA11A.3578

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

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

Mailing Address E5444 510TH AVE.

City MENOMONIE State WI Zip Code 54751-5647

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
365.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2020

Transaction ID : SA11A.3762

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

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

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

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

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

FOR LINE NUMBER: PAGE 61 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WOLDING, DON, A., MR.,**  
Mailing Address PO BOX 3

City: NELSONVILLE State: WI Zip Code: 54458-0003

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

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt: 07 / 21 / 2020  
Transaction ID : SA11A.3563

Amount of Each Receipt this Period: 500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**WINRED**  
Mailing Address PO BOX 9891

City: ARLINGTON State: VA Zip Code: 22219-1891

FEC ID number of contributing federal political committee: **C** C00694323

Name of Employer: Occupation:

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
258553.95

Date of Receipt: 07 / 21 / 2020  
Transaction ID : SA11C.3551567

Amount of Each Receipt this Period: 500.00

Memo Item CONTRIBUTION  
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**C.** Full Name (Last, First, Middle Initial)  
**NICKLAUS, CAMILLE, , MS.,**  
Mailing Address 7815 VOLKMAN STREET

City: ROTHSCHILD State: WI Zip Code: 54474-1261

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

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt: 07 / 21 / 2020  
Transaction ID : SA11A.3556

Amount of Each Receipt this Period: 500.00

Memo Item CONTRIBUTION  
EARMARKED FROM WINRED

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

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

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

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

FOR LINE NUMBER: PAGE 62 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WINRED**  
 Mailing Address **PO BOX 9891**  
 City **ARLINGTON** State **VA** Zip Code **22219-1891**  
 FEC ID number of contributing federal political committee. **C C00694323**  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
**258553.95**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 21 / 2020**  
**Transaction ID : SA11C.3551568**  
 Amount of Each Receipt this Period  
**100.00**  
 Memo Item  
**CONTRIBUTION**  
 SEE ATTRIBUTION BELOW FOR ALL DONORS  
 ABOVE ITEMIZATION THRESHOLD

**B.** Full Name (Last, First, Middle Initial)  
**BERG, LAURENCE, , MR.,**  
 Mailing Address **151 FAIRWAY COURT**  
 City **ONALASKA** State **WI** Zip Code **54650-8713**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
**RETIRED RETIRED**  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 21 / 2020**  
**Transaction ID : SA11A.3557**  
 Amount of Each Receipt this Period  
**100.00**  
 Memo Item  
**CONTRIBUTION**  
**EARMARKED FROM WINRED**

**C.** Full Name (Last, First, Middle Initial)  
**WINRED**  
 Mailing Address **PO BOX 9891**  
 City **ARLINGTON** State **VA** Zip Code **22219-1891**  
 FEC ID number of contributing federal political committee. **C C00694323**  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
**258553.95**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 21 / 2020**  
**Transaction ID : SA11C.3551569**  
 Amount of Each Receipt this Period  
**1000.00**  
 Memo Item  
**CONTRIBUTION**  
 SEE ATTRIBUTION BELOW FOR ALL DONORS  
 ABOVE ITEMIZATION THRESHOLD

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **100.00**  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 63 OF 114  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address 2451 LOST DAUPHIN RD

City DE PERE State WI Zip Code 54115-9168

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2020

**Transaction ID : SA11A.3558**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

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

Mailing Address 1192 NIAGARA RD

City OCONOMOWOC State WI Zip Code 53066-6405

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2020

**Transaction ID : SA11A.3931**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

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

Mailing Address 504 W BLEEKER STREET

City ASPEN State CO Zip Code 81611-1228

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2020

**Transaction ID : SA11A.3859**

Amount of Each Receipt this Period  
5600.00

Memo Item  
CONTRIBUTION  
SEE REDESIGNATION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6700.00

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

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

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

FOR LINE NUMBER: PAGE 64 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Van Orden for Congress

**A.** Full Name (Last, First, Middle Initial)  
HILLMAN, ROBERTA, , MS.,  
Mailing Address 504 W BLEEKER STREET

City ASPEN State CO Zip Code 81611-1228

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2020

Transaction ID : SA11A.3860

Amount of Each Receipt this Period  
- 2800.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
HILLMAN, ROBERTA, , MS.,  
Mailing Address 504 W BLEEKER STREET

City ASPEN State CO Zip Code 81611-1228

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2020

Transaction ID : SA11A.3861

Amount of Each Receipt this Period  
2800.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
HILLMAN, TATNALL, , MR.,  
Mailing Address 504 WEST BLEEKER STREET

City ASPEN State CO Zip Code 81611-1228

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2020

Transaction ID : SA11A.3862

Amount of Each Receipt this Period  
5600.00

Memo Item  
CONTRIBUTION  
SEE REDESIGNATION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5600.00

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



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

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

FOR LINE NUMBER: PAGE 65 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HILLMAN, TATNALL, , MR.,**  
 Mailing Address 504 WEST BLEEKER STREET

City ASPEN State CO Zip Code 81611-1228

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 22 / 2020

Transaction ID : SA11A.3878

Amount of Each Receipt this Period  
 - 2800.00

Memo Item  
 CONTRIBUTION  
 REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**HILLMAN, TATNALL, , MR.,**  
 Mailing Address 504 WEST BLEEKER STREET

City ASPEN State CO Zip Code 81611-1228

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 22 / 2020

Transaction ID : SA11A.3879

Amount of Each Receipt this Period  
 2800.00

Memo Item  
 CONTRIBUTION  
 REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**LESAR, NICK, , MR.,**  
 Mailing Address 1706 TURTLE MOUND LANE

City WHITEWATER State WI Zip Code 53190-1564

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 22 / 2020

Transaction ID : SA11A.3897

Amount of Each Receipt this Period  
 1000.00

Memo Item  
 CONTRIBUTION

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 66 OF 114  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MULCAHY, MARY, , MRS.,**  
Mailing Address 1093 E. CIRCLE DR.  
City MILWAUKEE State WI Zip Code 53217-5364  
FEC ID number of contributing federal political committee. **C**  
Name of Employer HOME MAKER Occupation HOME MAKER  
Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2020  
**Transaction ID : SA11A.3934**  
Amount of Each Receipt this Period  
250.00  
 Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PANDL, THERESE, , MS.,**  
Mailing Address 1189 PLEASANT VALLEY DR.  
City ONEIDA State WI Zip Code 54155-8619  
FEC ID number of contributing federal political committee. **C**  
Name of Employer HSHS EASTERN WISCONSIN DIVISION Occupation PRESIDENT AND CEO  
Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2020  
**Transaction ID : SA11A.3898**  
Amount of Each Receipt this Period  
500.00  
 Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PUZISS, BRIAN, , MR.,**  
Mailing Address P.O. BOX 6328  
City PORTLAND State OR Zip Code 97228-6328  
FEC ID number of contributing federal political committee. **C**  
Name of Employer IT MANAGEMENT Occupation OWNER  
Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2020  
**Transaction ID : SA11A.3896**  
Amount of Each Receipt this Period  
1000.00  
 Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1750.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 67 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WINRED**  
 Mailing Address **PO BOX 9891**  
 City **ARLINGTON** State **VA** Zip Code **22219-1891**  
 FEC ID number of contributing federal political committee. **C C00694323**  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
**258553.95**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 22 / 2020**  
**Transaction ID : SA11C.3834848**  
 Amount of Each Receipt this Period  
**1000.00**  
 Memo Item  
**CONTRIBUTION**  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B.** Full Name (Last, First, Middle Initial)  
**OBMA, PADRAIC, , MR.,**  
 Mailing Address **628 SUNSET CIRCLE**  
 City **GREEN BAY** State **WI** Zip Code **54301-1346**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
**STRIVE MEDTECH** **ORTHOPEdic SURGEON**  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 22 / 2020**  
**Transaction ID : SA11A.3837**  
 Amount of Each Receipt this Period  
**1000.00**  
 Memo Item  
**CONTRIBUTION**  
**EARMARKED FROM WINRED**

**C.** Full Name (Last, First, Middle Initial)  
**WINRED**  
 Mailing Address **PO BOX 9891**  
 City **ARLINGTON** State **VA** Zip Code **22219-1891**  
 FEC ID number of contributing federal political committee. **C C00694323**  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
**258553.95**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 22 / 2020**  
**Transaction ID : SA11C.3834850**  
 Amount of Each Receipt this Period  
**500.00**  
 Memo Item  
**CONTRIBUTION**  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

**1000.00**  
**500.00**

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

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

FOR LINE NUMBER: PAGE 68 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HEYER, MICHAEL, , MR.,**  
 Mailing Address 3175 WATERFORD COURT

City NEW BERLIN	State WI	Zip Code 53151-9530
--------------------	-------------	------------------------

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

Name of Employer RACINE DANISH KRINGLE	Occupation BUSINESS OWNER
---	------------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 22 / 2020

**Transaction ID : SA11A.3839**

Amount of Each Receipt this Period  
 500.00

Memo Item  
 CONTRIBUTION  
 EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
**WINRED**  
 Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 258553.95

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 22 / 2020

**Transaction ID : SA11C.3834854**

Amount of Each Receipt this Period  
 2800.00

Memo Item  
 CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**C.** Full Name (Last, First, Middle Initial)  
**MULLINS, LUKE, , MR.,**  
 Mailing Address 4780 BLACKBERRY LANE

City JUNCTION CITY	State WI	Zip Code 54443-9518
-----------------------	-------------	------------------------

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

Name of Employer MULLINS CHEESE	Occupation MANAGER
------------------------------------	-----------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 22 / 2020

**Transaction ID : SA11A.3857**

Amount of Each Receipt this Period  
 2800.00

Memo Item  
 CONTRIBUTION  
 REDESIGNATION FROM PRIMARY

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 69 OF 114	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address 4780 BLACKBERRY LANE

City JUNCTION CITY	State WI	Zip Code 54443-9518
-----------------------	-------------	------------------------

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

Name of Employer MULLINS CHEESE	Occupation MANAGER
------------------------------------	-----------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2020

**Transaction ID : SA11A.3843**

Amount of Each Receipt this Period  
2800.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED; SEE REDESIGNATION

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

Mailing Address 4780 BLACKBERRY LANE

City JUNCTION CITY	State WI	Zip Code 54443-9518
-----------------------	-------------	------------------------

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

Name of Employer MULLINS CHEESE	Occupation MANAGER
------------------------------------	-----------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2020

**Transaction ID : SA11A.3857B**

Amount of Each Receipt this Period  
- 2800.00

Memo Item  
CONTRIBUTION

REDESIGNATION TO GENERAL

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

Mailing Address

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

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	2800.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	135710.00

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

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

FOR LINE NUMBER: PAGE 70 OF 114  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**FAMILY-PAC FEDERAL**

Mailing Address 414 N ORLEANS PLAZA #320

City CHICAGO State IL Zip Code 60654-4466

FEC ID number of contributing federal political committee. **C** C00362178

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 21 2020

Transaction ID : SA11C.3593

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 114	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**VAN ORDEN, DERRICK, F., MR.,**

Mailing Address PO BOX 824

City CHIPPEWA FALLS	State WI	Zip Code 54729
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00742007

Name of Employer RETIRED MILITARY	Occupation RETIRED MILITARY
--------------------------------------	--------------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
11639.63

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 01 / 2020

**Transaction ID : SA11D.1128**

Amount of Each Receipt this Period  
47.92

Memo Item  
IN-KIND CONTRIBUTION SHIPPING  
SEE REIMBURSEMENT 7/13

**B.** Full Name (Last, First, Middle Initial)  
**VAN ORDEN, DERRICK, F., MR.,**

Mailing Address PO BOX 824

City CHIPPEWA FALLS	State WI	Zip Code 54729
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00742007

Name of Employer RETIRED MILITARY	Occupation RETIRED MILITARY
--------------------------------------	--------------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
11639.63

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 01 / 2020

**Transaction ID : SA11D.1129**

Amount of Each Receipt this Period  
100.00

Memo Item  
IN-KIND CONTRIBUTION TEXTING  
SEE REIMBURSEMENT 07/13

**C.** Full Name (Last, First, Middle Initial)  
**VAN ORDEN, DERRICK, F., MR.,**

Mailing Address PO BOX 824

City CHIPPEWA FALLS	State WI	Zip Code 54729
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00742007

Name of Employer RETIRED MILITARY	Occupation RETIRED MILITARY
--------------------------------------	--------------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
11639.63

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 01 / 2020

**Transaction ID : SA11D.1184**

Amount of Each Receipt this Period  
100.00

Memo Item  
IN-KIND CONTRIBUTION TEXTING  
SEE REIMBURSEMENT 7/22

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 114	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**VAN ORDEN, DERRICK, F., MR.,**

Mailing Address PO BOX 824

City CHIPPEWA FALLS	State WI	Zip Code 54729
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00742007

Name of Employer RETIRED MILITARY	Occupation RETIRED MILITARY
--------------------------------------	--------------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
11639.63

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 06 / 2020

**Transaction ID : SA11D.1125**

Amount of Each Receipt this Period  
55.00

Memo Item  
IN-KIND CONTRIBUTION POSTAGE  
SEE REIMBURSEMENT 7/13

**B.** Full Name (Last, First, Middle Initial)  
**VAN ORDEN, DERRICK, F., MR.,**

Mailing Address PO BOX 824

City CHIPPEWA FALLS	State WI	Zip Code 54729
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00742007

Name of Employer RETIRED MILITARY	Occupation RETIRED MILITARY
--------------------------------------	--------------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
11639.63

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 08 / 2020

**Transaction ID : SA11D.1127**

Amount of Each Receipt this Period  
1822.05

Memo Item  
IN-KIND CONTRIBUTION LIST RENTAL  
SEE REIMBURSEMENT 7/8

**C.** Full Name (Last, First, Middle Initial)  
**VAN ORDEN, DERRICK, F., MR.,**

Mailing Address PO BOX 824

City CHIPPEWA FALLS	State WI	Zip Code 54729
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00742007

Name of Employer RETIRED MILITARY	Occupation RETIRED MILITARY
--------------------------------------	--------------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
11639.63

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 13 / 2020

**Transaction ID : SA11D.1126**

Amount of Each Receipt this Period  
1147.00

Memo Item  
IN-KIND CONTRIBUTION TEXTING  
SEE REIMBURSEMENT 7/22

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 73 OF 114	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**VAN ORDEN, DERRICK, F., MR.,**

Mailing Address PO BOX 824

City CHIPPEWA FALLS	State WI	Zip Code 54729
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00742007

Name of Employer RETIRED MILITARY	Occupation RETIRED MILITARY
--------------------------------------	--------------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
11639.63

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 14 / 2020

**Transaction ID : SA11D.1109**

Amount of Each Receipt this Period  
251.27

Memo Item  
IN-KIND CONTRIBUTION WEB SERVICES  
SEE REIMBURSEMENT 8/17

**B.** Full Name (Last, First, Middle Initial)  
**VAN ORDEN, DERRICK, F., MR.,**

Mailing Address PO BOX 824

City CHIPPEWA FALLS	State WI	Zip Code 54729
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00742007

Name of Employer RETIRED MILITARY	Occupation RETIRED MILITARY
--------------------------------------	--------------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
11639.63

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 18 / 2020

**Transaction ID : SA11D.410**

Amount of Each Receipt this Period  
70.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**VAN ORDEN, DERRICK, F., MR.,**

Mailing Address PO BOX 824

City CHIPPEWA FALLS	State WI	Zip Code 54729
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00742007

Name of Employer RETIRED MILITARY	Occupation RETIRED MILITARY
--------------------------------------	--------------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
11639.63

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2020

**Transaction ID : SA11D.1130**

Amount of Each Receipt this Period  
71.21

Memo Item  
IN-KIND CONTRIBUTION WEB SERVICES  
SEE REIMBURSEMENT 08/10

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	70.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	70.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 114			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
Van Orden for Congress

Full Name (Last, First, Middle Initial) <b>A. NATIONAL MEDIA RESEARCH, PLANNING &amp; PLACEMENT</b>		Date of Disbursement
Mailing Address 817 SLATERS LANE		M M / D D / Y Y Y Y 07 / 01 / 2020
City ALEXANDRIA	State VA	FEC Identification Number C
Zip Code 22314	Purpose of Disbursement ONLINE ADVERTISING	Amount of Each Disbursement this Period 22.50
Candidate Name	Category/Type	Transaction ID : SB17.I431
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. REVV FUNDRAISING PLATFORM</b>		Date of Disbursement
Mailing Address 1776 WILSON BLVD. SUITE 530		M M / D D / Y Y Y Y 07 / 01 / 2020
City ARLINGTON	State VA	FEC Identification Number C
Zip Code 22209	Purpose of Disbursement ONLINE PRODUCT FEE	Amount of Each Disbursement this Period 42.00
Candidate Name	Category/Type	Transaction ID : SB17.I447
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. REVV FUNDRAISING PLATFORM</b>		Date of Disbursement
Mailing Address 1776 WILSON BLVD. SUITE 530		M M / D D / Y Y Y Y 07 / 01 / 2020
City ARLINGTON	State VA	FEC Identification Number C
Zip Code 22209	Purpose of Disbursement ONLINE PROCESSING FEE	Amount of Each Disbursement this Period 3.00
Candidate Name	Category/Type	Transaction ID : SB17.I457
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	67.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 114	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C C00694323	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 33.79	
Purpose of Disbursement ONLINE PROCESSING FEE		Category/ Type	Transaction ID : SB17.I411	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C C00694323	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 2.50	
Purpose of Disbursement ONLINE PROCESSING FEE		Category/ Type	Transaction ID : SB17.I412	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. NATIONAL MEDIA RESEARCH, PLANNING &amp; PLACEMENT</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2020	
Mailing Address 817 SLATERS LANE			FEC Identification Number C	
City ALEXANDRIA	State VA	Zip Code 22314	Amount of Each Disbursement this Period 6.50	
Purpose of Disbursement ONLINE ADVERTISING		Category/ Type	Transaction ID : SB17.I432	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	42.79
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 114	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C C00694323	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 13.85	
Purpose of Disbursement ONLINE PROCESSING FEE		Category/ Type	Transaction ID : SB17.I413	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 04 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C C00694323	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 2.92	
Purpose of Disbursement ONLINE PROCESSING FEE		Category/ Type	Transaction ID : SB17.I415	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. NATIONAL MEDIA RESEARCH, PLANNING &amp; PLACEMENT</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2020	
Mailing Address 817 SLATERS LANE			FEC Identification Number C	
City ALEXANDRIA	State VA	Zip Code 22314	Amount of Each Disbursement this Period 3.50	
Purpose of Disbursement ONLINE ADVERTISING		Category/ Type	Transaction ID : SB17.I433	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	20.27
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 114			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A. REVV FUNDRAISING PLATFORM**

Full Name (Last, First, Middle Initial)  
Mailing Address 1776 WILSON BLVD.  
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement ONLINE PRODUCT FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 05 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 20.00

Transaction ID : SB17.I448

Memo Item

**B. REVV FUNDRAISING PLATFORM**

Full Name (Last, First, Middle Initial)  
Mailing Address 1776 WILSON BLVD.  
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement ONLINE PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 05 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 1.50

Transaction ID : SB17.I458

Memo Item

**C. WINRED TECHNICAL SERVICES LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement ONLINE PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 05 / 2020

FEC Identification Number: C C00694323

Amount of Each Disbursement this Period: 23.43

Transaction ID : SB17.I416

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 44.93

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 78 OF 114	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. K2 &amp; COMPANY</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2020
Mailing Address 1117 MACEY WAY		FEC Identification Number C
City STILLWATER	State MN	Zip Code 55082
Purpose of Disbursement COMMUNICATIONS CONSULTING		Amount of Each Disbursement this Period 2500.00
Candidate Name		Transaction ID : SB17.I405
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NATIONAL MEDIA RESEARCH, PLANNING &amp; PLACEMENT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2020
Mailing Address 817 SLATERS LANE		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement ONLINE ADVERTISING		Amount of Each Disbursement this Period 1.00
Candidate Name		Transaction ID : SB17.I434
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THE VOYAGEUR COMPANY, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2020
Mailing Address 1151 ORCHARD CIRCLE		FEC Identification Number C
City MENDOTA HEIGHTS	State MN	Zip Code 55118
Purpose of Disbursement DIRECT MAIL EXPENSE		Amount of Each Disbursement this Period 24068.71
Candidate Name		Transaction ID : SB17.I403
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	26569.71
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 79 OF 114	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number <b>C</b> C00694323	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 9.02	
Purpose of Disbursement ONLINE PROCESSING FEE		Category/ Type	Transaction ID : <b>SB17.I417</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. ANEDOT, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2020	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number <b>C</b>	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 2.30	
Purpose of Disbursement ONLINE PROCESSING FEE		Category/ Type	Transaction ID : <b>SB17.I467</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number <b>C</b> C00694323	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 110.37	
Purpose of Disbursement ONLINE PROCESSING FEE		Category/ Type	Transaction ID : <b>SB17.I418</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	121.69
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 114			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial)  
**A. NATIONAL MEDIA RESEARCH, PLANNING & PLACEMENT**

Mailing Address 817 SLATERS LANE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement ONLINE ADVERTISING

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 08 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 34.00

Transaction ID : SB17.I435

Memo Item

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

Mailing Address 12636 XYLITE STREET NORTHEAST

City BLAINE State MN Zip Code 55449

Purpose of Disbursement EVENT EXPENSE PARACHUTE TEAM

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 08 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 3500.00

Transaction ID : SB17.I519

Memo Item

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

Mailing Address 1465 SOUTH WASHBURN STREET

City OSHKOSH State WI Zip Code 54904

Purpose of Disbursement PRINTING

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 08 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 277.13

Transaction ID : SB17.I404

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 3811.13

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 114			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. SUREPAYROLL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2020
Mailing Address 2350 RAVINE WAY SUITE 100		FEC Identification Number C
City GLENVIEW	State IL	Zip Code 60025
Purpose of Disbursement PAYROLL SVC	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 54.99	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I408
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2020
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement ONLINE PROCESSING FEE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 26.81	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I419
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. NATIONAL MEDIA RESEARCH, PLANNING &amp; PLACEMENT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2020
Mailing Address 817 SLATERS LANE		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement ONLINE ADVERTISING	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 9.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I436
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	90.80
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 114	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number <b>C</b> C00694323	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 83.45	
Purpose of Disbursement ONLINE PROCESSING FEE		Category/ Type	Transaction ID : <b>SB17.I420</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. NATIONAL MEDIA RESEARCH, PLANNING &amp; PLACEMENT</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2020	
Mailing Address 817 SLATERS LANE			FEC Identification Number <b>C</b>	
City ALEXANDRIA	State VA	Zip Code 22314	Amount of Each Disbursement this Period 7.00	
Purpose of Disbursement ONLINE ADVERTISING		Category/ Type	Transaction ID : <b>SB17.I437</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number <b>C</b> C00694323	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 65.92	
Purpose of Disbursement ONLINE PROCESSING FEE		Category/ Type	Transaction ID : <b>SB17.I421</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	156.37
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 114			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. REVV FUNDRAISING PLATFORM</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2020		
Mailing Address 1776 WILSON BLVD. SUITE 530			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 47.00		
Purpose of Disbursement ONLINE PRODUCT FEE		Category/ Type	Transaction ID : SB17.I449		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. REVV FUNDRAISING PLATFORM</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2020		
Mailing Address 1776 WILSON BLVD. SUITE 530			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 3.10		
Purpose of Disbursement ONLINE PROCESSING FEE		Category/ Type	Transaction ID : SB17.I459		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2020		
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 41.90		
Purpose of Disbursement ONLINE PROCESSING FEE		Category/ Type	Transaction ID : SB17.I422		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	92.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 114			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial)  
**A. NATIONAL MEDIA RESEARCH, PLANNING & PLACEMENT**

Mailing Address 817 SLATERS LANE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement ONLINE ADVERTISING

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 12 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 31.50

Transaction ID : SB17.I438

Memo Item

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

Mailing Address 1776 WILSON BLVD. SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement ONLINE PRODUCT FEE

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 12 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 41.00

Transaction ID : SB17.I450

Memo Item

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

Mailing Address 1776 WILSON BLVD. SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement ONLINE PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 12 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 2.74

Transaction ID : SB17.I460

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 75.24

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 85 OF 114	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2020
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C 00694323
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement ONLINE PROCESSING FEE		Amount of Each Disbursement this Period 130.17
Candidate Name		Transaction ID : SB17.I423
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VAN ORDEN, DERRICK, F., MR.,</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2020
Mailing Address PO BOX 824		FEC Identification Number C 00742007
City CHIPPEWA FALLS	State WI	Zip Code 54729
Purpose of Disbursement TRAVEL REIMBURSEMENT		Amount of Each Disbursement this Period 590.84
Candidate Name VAN ORDEN, DERRICK, F., MR.,		Transaction ID : SB17.I477
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item \$8.97 OF PAYMENT FOR DEBT INCURRED 6/26 (UNITEMIZED)
State: WI District: 03		

Full Name (Last, First, Middle Initial) <b>C. HOLIDAY INN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2020
Mailing Address 9409 WISCONSIN 16		FEC Identification Number C
City ONALASKA	State WI	Zip Code 54650
Purpose of Disbursement TRAVEL		Amount of Each Disbursement this Period 213.48
Candidate Name		Transaction ID : SB17.I485
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	721.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 114			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. VAN ORDEN, DERRICK, F., MR.,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2020		
Mailing Address PO BOX 824			FEC Identification Number <b>C</b> C00742007		
City CHIPPEWA FALLS	State WI	Zip Code 54729	Amount of Each Disbursement this Period 102.92		
Purpose of Disbursement POSTAGE AND SHIPPING REIMBURSEMENT		Category/Type	Transaction ID : <b>SB17.I481</b>		
Candidate Name <b>VAN ORDEN, DERRICK, F., MR.,</b>		Memo Item <input type="checkbox"/> REPORTED AS IN-KIND ON SCHEDULE A			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: WI	District: 03				

Full Name (Last, First, Middle Initial) <b>B. FEDERAL EXPRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2020		
Mailing Address 942 SOUTH SHADY GROVE RD.			FEC Identification Number <b>C</b>		
City MEMPHIS	State TN	Zip Code 38120	Amount of Each Disbursement this Period 47.92		
Purpose of Disbursement SHIPPING		Category/Type	Transaction ID : <b>SB17.I482</b>		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. USPS</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2020		
Mailing Address 475 L'ENFANT PLAZA, SW			FEC Identification Number <b>C</b>		
City WASHINGTON	State DC	Zip Code 20260	Amount of Each Disbursement this Period 55.00		
Purpose of Disbursement POSTAGE		Category/Type	Transaction ID : <b>SB17.I483</b>		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	102.92
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 87 OF 114	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. VAN ORDEN, DERRICK, F., MR.,</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2020
Mailing Address PO BOX 824		FEC Identification Number C C00742007
City CHIPPEWA FALLS	State WI	Zip Code 54729
Purpose of Disbursement LIST RENTAL REIMBURSEMENT		Amount of Each Disbursement this Period 1822.05
Candidate Name <b>VAN ORDEN, DERRICK, F., MR.,</b>		Transaction ID : <b>SB17.I486</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item REPORTED AS IN-KIND ON SCHEDULE A
State: WI District: 03		

Full Name (Last, First, Middle Initial) <b>B. WISCONSIN RIGHT TO LIFE</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2020
Mailing Address 5317 NORTH 118TH COURT		FEC Identification Number C
City MILWAUKEE	State WI	Zip Code 53225
Purpose of Disbursement LIST RENTAL		Amount of Each Disbursement this Period 1822.05
Candidate Name		Transaction ID : <b>SB17.I487</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VAN ORDEN, DERRICK, F., MR.,</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2020
Mailing Address PO BOX 824		FEC Identification Number C C00742007
City CHIPPEWA FALLS	State WI	Zip Code 54729
Purpose of Disbursement TEXTING REIMBURSEMENT		Amount of Each Disbursement this Period 100.00
Candidate Name <b>VAN ORDEN, DERRICK, F., MR.,</b>		Transaction ID : <b>SB17.I517</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item REPORTED AS IN-KIND ON SCHEDULE A
State: WI District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1922.05
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 88 OF 114	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. RUMBLE, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2020
Mailing Address 2101 L STREET NORTHWEST		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20037
Purpose of Disbursement TEXTING		Amount of Each Disbursement this Period 100.00
Candidate Name		Transaction ID : SB17.I518
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VAN ORDEN, NATHAN, , MR.,</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2020
Mailing Address 15312 PAREV TER.		FEC Identification Number C
City GERMANTOWN	State MD	Zip Code 20874
Purpose of Disbursement INTERNET EXPENSE REIMBURSEMENT NO ITEMIZATION		Amount of Each Disbursement this Period 29.00
Candidate Name		Transaction ID : SB17.I490
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. EAGLE BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2020
Mailing Address 7815 WOODMONT AVENUE		FEC Identification Number C
City BETHESDA	State MD	Zip Code 20814
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period 112.96
Candidate Name		Transaction ID : SB17.I472
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	141.96
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 114			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. KIRSTIN HOPKINS, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2020							
Mailing Address 7110 GREENBROOK LANE									
City DALLAS	State TX	Zip Code 75214							
Purpose of Disbursement FUNDRAISING CONSULTING		FEC Identification Number C							
Candidate Name		Amount of Each Disbursement this Period 47867.40							
Office Sought: <table border="0"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>	<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I488 <input type="checkbox"/> Memo Item	
<input type="checkbox"/>	House								
<input type="checkbox"/>	Senate								
<input type="checkbox"/>	President								
State:	District:								

Full Name (Last, First, Middle Initial) <b>B. NATIONAL MEDIA RESEARCH, PLANNING &amp; PLACEMENT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2020							
Mailing Address 817 SLATERS LANE									
City ALEXANDRIA	State VA	Zip Code 22314							
Purpose of Disbursement ONLINE ADVERTISING		FEC Identification Number C							
Candidate Name		Amount of Each Disbursement this Period 13.50							
Office Sought: <table border="0"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>	<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I445 <input type="checkbox"/> Memo Item	
<input type="checkbox"/>	House								
<input type="checkbox"/>	Senate								
<input type="checkbox"/>	President								
State:	District:								

Full Name (Last, First, Middle Initial) <b>C. PATHFINDER COMMUNICATIONS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2020							
Mailing Address 857 NATHAN HALE ROAD									
City BERWYN	State PA	Zip Code 19312							
Purpose of Disbursement PROMOTIONAL MATERIALS BUMPER STICKERS		FEC Identification Number C							
Candidate Name		Amount of Each Disbursement this Period 565.00							
Office Sought: <table border="0"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>	<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I402 <input type="checkbox"/> Memo Item	
<input type="checkbox"/>	House								
<input type="checkbox"/>	Senate								
<input type="checkbox"/>	President								
State:	District:								

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	48445.90
<b>TOTAL</b> This Period (last page this line number only).....	48445.90

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 114			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
Van Orden for Congress

Full Name (Last, First, Middle Initial) <b>A. REVV FUNDRAISING PLATFORM</b>			Date of Disbursement
Mailing Address 1776 WILSON BLVD. SUITE 530			M M / D D / Y Y Y Y 07 / 13 / 2020
City ARLINGTON	State VA	Zip Code 22209	FEC Identification Number C
Purpose of Disbursement ONLINE PRODUCT FEE		Category/ Type	Amount of Each Disbursement this Period 20.00
Candidate Name			Transaction ID : SB17.I451
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>B. REVV FUNDRAISING PLATFORM</b>			Date of Disbursement
Mailing Address 1776 WILSON BLVD. SUITE 530			M M / D D / Y Y Y Y 07 / 13 / 2020
City ARLINGTON	State VA	Zip Code 22209	FEC Identification Number C
Purpose of Disbursement ONLINE PROCESSING FEE		Category/ Type	Amount of Each Disbursement this Period 1.50
Candidate Name			Transaction ID : SB17.I461
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>C. STEINHERT PRINTING, INC.</b>			Date of Disbursement
Mailing Address 1465 SOUTH WASHBURN STREET			M M / D D / Y Y Y Y 07 / 13 / 2020
City OSHKOSH	State WI	Zip Code 54904	FEC Identification Number C
Purpose of Disbursement PRINTING		Category/ Type	Amount of Each Disbursement this Period 10456.21
Candidate Name			Transaction ID : SB17.I491
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10477.71
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 114			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2020		
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 106.55		
Purpose of Disbursement ONLINE PROCESSING FEE		Category/ Type	Transaction ID : SB17.I414		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2020		
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 186.95		
Purpose of Disbursement ONLINE PROCESSING FEE		Category/ Type	Transaction ID : SB17.I424		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. BRINK, SAMUEL, , MR.,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2020		
Mailing Address 918 VINE STREET			FEC Identification Number C		
City LA CROSSE	State WI	Zip Code 54601	Amount of Each Disbursement this Period 609.08		
Purpose of Disbursement PAYROLL		Category/ Type	Transaction ID : SB17.I469		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	902.58
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 92 OF 114	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. YOSAITIS, ROB, , MR.,</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2020
Mailing Address 714 HILLVIEW AVENUE		FEC Identification Number C
City LA CROSSE	State WI	Zip Code 54601
Purpose of Disbursement PAYROLL		Amount of Each Disbursement this Period 2223.75
Candidate Name	Category/ Type	Transaction ID : SB17.I470
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2020
Mailing Address 1593 SPRING HILL ROAD		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement DATABASE		Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/ Type	Transaction ID : SB17.I520
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. NATIONAL MEDIA RESEARCH, PLANNING &amp; PLACEMENT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2020
Mailing Address 817 SLATERS LANE		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement ONLINE ADVERTISING		Amount of Each Disbursement this Period 24.50
Candidate Name	Category/ Type	Transaction ID : SB17.I439
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3248.25
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 114			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. ONMESSAGE INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2020		
Mailing Address 817 SLATERS LANE					
City ALEXANDRIA	State VA	Zip Code 22314	FEC Identification Number C		
Purpose of Disbursement CABLE TV PLACEMENT			Amount of Each Disbursement this Period 39224.50		
Candidate Name			Transaction ID : SB17.I498		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. PATHFINDER COMMUNICATIONS</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2020		
Mailing Address 857 NATHAN HALE ROAD					
City BERWYN	State PA	Zip Code 19312	FEC Identification Number C		
Purpose of Disbursement PROMOTIONAL MATERIALS STICKERS			Amount of Each Disbursement this Period 375.00		
Candidate Name			Transaction ID : SB17.I406		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. PATHFINDER COMMUNICATIONS</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2020		
Mailing Address 857 NATHAN HALE ROAD					
City BERWYN	State PA	Zip Code 19312	FEC Identification Number C		
Purpose of Disbursement DIRECT MAIL EXPENSE			Amount of Each Disbursement this Period 30663.41		
Candidate Name			Transaction ID : SB17.I407		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	70262.91
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 94 OF 114	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. REVV FUNDRAISING PLATFORM</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2020
Mailing Address 1776 WILSON BLVD. SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement ONLINE PRODUCT FEE		Amount of Each Disbursement this Period 20.00
Candidate Name		Transaction ID : SB17.I452
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. REVV FUNDRAISING PLATFORM</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2020
Mailing Address 1776 WILSON BLVD. SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement ONLINE PROCESSING FEE		Amount of Each Disbursement this Period 1.50
Candidate Name		Transaction ID : SB17.I462
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SUREPAYROLL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2020
Mailing Address 2350 RAVINE WAY SUITE 100		FEC Identification Number C
City GLENVIEW	State IL	Zip Code 60025
Purpose of Disbursement PAYROLL TAXES		Amount of Each Disbursement this Period 1289.07
Candidate Name		Transaction ID : SB17.I409
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1310.57
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 95 OF 114	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number <b>C</b> C00694323	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 274.05	
Purpose of Disbursement ONLINE PROCESSING FEE		Category/ Type	Transaction ID : <b>SB17.I425</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. ANEDOT, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2020	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number <b>C</b>	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 9.60	
Purpose of Disbursement ONLINE PROCESSING FEE		Category/ Type	Transaction ID : <b>SB17.I468</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. NATIONAL MEDIA RESEARCH, PLANNING &amp; PLACEMENT</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2020	
Mailing Address 817 SLATERS LANE			FEC Identification Number <b>C</b>	
City ALEXANDRIA	State VA	Zip Code 22314	Amount of Each Disbursement this Period 50.50	
Purpose of Disbursement ONLINE ADVERTISING		Category/ Type	Transaction ID : <b>SB17.I440</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	334.15
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 114
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A. REVV FUNDRAISING PLATFORM**

Full Name (Last, First, Middle Initial)  
Mailing Address 1776 WILSON BLVD.  
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement ONLINE PRODUCT FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 15 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 105.00

Transaction ID : SB17.I453

Memo Item

**B. REVV FUNDRAISING PLATFORM**

Full Name (Last, First, Middle Initial)  
Mailing Address 1776 WILSON BLVD.  
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement ONLINE PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 15 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 6.94

Transaction ID : SB17.I463

Memo Item

**C. WINRED TECHNICAL SERVICES LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement ONLINE PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 15 / 2020

FEC Identification Number: C C00694323

Amount of Each Disbursement this Period: 128.22

Transaction ID : SB17.I426

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 240.16

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 97 OF 114	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2020
Mailing Address 1340 POYDRAS STREET SUITE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112
Purpose of Disbursement ONLINE PROCESSING FEE		Amount of Each Disbursement this Period 5.20
Candidate Name		Transaction ID : SB17.I511
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NATIONAL MEDIA RESEARCH, PLANNING &amp; PLACEMENT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2020
Mailing Address 817 SLATERS LANE		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement ONLINE ADVERTISING		Amount of Each Disbursement this Period 24.00
Candidate Name		Transaction ID : SB17.I441
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. REVV FUNDRAISING PLATFORM</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2020
Mailing Address 1776 WILSON BLVD. SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement ONLINE PRODUCT FEE		Amount of Each Disbursement this Period 75.00
Candidate Name		Transaction ID : SB17.I454
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	104.20
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 98 OF 114	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. REVV FUNDRAISING PLATFORM</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2020
Mailing Address 1776 WILSON BLVD. SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement ONLINE PROCESSING FEE		Amount of Each Disbursement this Period 5.20
Candidate Name		Transaction ID : SB17.I464
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2020
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement ONLINE PROCESSING FEE		Amount of Each Disbursement this Period 15.17
Candidate Name		Transaction ID : SB17.I427
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. KIRSTIN HOPKINS, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2020
Mailing Address 7110 GREENBROOK LANE		FEC Identification Number C
City DALLAS	State TX	Zip Code 75214
Purpose of Disbursement TRAVEL		Amount of Each Disbursement this Period 1016.38
Candidate Name		Transaction ID : SB17.I494
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1036.75
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 114			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2020		
Mailing Address PO BOX 619616			FEC Identification Number C		
City DALLAS FT. WORTH A	State TX	Zip Code 75261	Amount of Each Disbursement this Period 405.70		
Purpose of Disbursement TRAVEL		Category/Type	Transaction ID : SB17.I496		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. KIRSTIN HOPKINS, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2020		
Mailing Address 7110 GREENBROOK LANE			FEC Identification Number C		
City DALLAS	State TX	Zip Code 75214	Amount of Each Disbursement this Period 67.52		
Purpose of Disbursement FLOWER EXPENSE REIMBURSEMENT - NO ITEMIZATION		Category/Type	Transaction ID : SB17.I495		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. KIRSTIN HOPKINS, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2020		
Mailing Address 7110 GREENBROOK LANE			FEC Identification Number C		
City DALLAS	State TX	Zip Code 75214	Amount of Each Disbursement this Period 499.19		
Purpose of Disbursement POSTAGE AND SHIPPING		Category/Type	Transaction ID : SB17.I497		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	566.71
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 114	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. FEDERAL EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2020
Mailing Address 942 SOUTH SHADY GROVE RD.		FEC Identification Number C
City MEMPHIS	State TN	Zip Code 38120
Purpose of Disbursement POSTAGE AND SHIPPING		Amount of Each Disbursement this Period 499.19
Candidate Name		Transaction ID : SB17.I525
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NATIONAL MEDIA RESEARCH, PLANNING &amp; PLACEMENT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2020
Mailing Address 817 SLATERS LANE		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement ONLINE ADVERTISING		Amount of Each Disbursement this Period 131.00
Candidate Name		Transaction ID : SB17.I442
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SAGE ADVISORY GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2020
Mailing Address 7816 ROSE GARDEN LN.		FEC Identification Number C
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement COMPLIANCE AND BOOKKEEPING		Amount of Each Disbursement this Period 2721.28
Candidate Name		Transaction ID : SB17.I492
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2852.28
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 114	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number <b>C</b> C00694323	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 102.63	
Purpose of Disbursement ONLINE PROCESSING FEE		Category/ Type	Transaction ID : <b>SB17.I428</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. NATIONAL MEDIA RESEARCH, PLANNING &amp; PLACEMENT</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2020	
Mailing Address 817 SLATERS LANE			FEC Identification Number <b>C</b>	
City ALEXANDRIA	State VA	Zip Code 22314	Amount of Each Disbursement this Period 59.50	
Purpose of Disbursement ONLINE ADVERTISING		Category/ Type	Transaction ID : <b>SB17.I443</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. REVV FUNDRAISING PLATFORM</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2020	
Mailing Address 1776 WILSON BLVD. SUITE 530			FEC Identification Number <b>C</b>	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 88.00	
Purpose of Disbursement ONLINE PRODUCT FEE		Category/ Type	Transaction ID : <b>SB17.I455</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	250.13
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 114			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. REVV FUNDRAISING PLATFORM</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2020
Mailing Address 1776 WILSON BLVD. SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement ONLINE PROCESSING FEE		Amount of Each Disbursement this Period 6.10
Candidate Name		Transaction ID : SB17.I465
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2020
Mailing Address 1776 WILSON BLVD. SUITE 530		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement ONLINE PROCESSING FEE		Amount of Each Disbursement this Period 64.94
Candidate Name		Transaction ID : SB17.I429
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. NATIONAL MEDIA RESEARCH, PLANNING &amp; PLACEMENT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2020
Mailing Address 817 SLATERS LANE		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement ONLINE ADVERTISING		Amount of Each Disbursement this Period 6.00
Candidate Name		Transaction ID : SB17.I444
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	77.04
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 114	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A. REVV FUNDRAISING PLATFORM**

Full Name (Last, First, Middle Initial)  
Mailing Address 1776 WILSON BLVD.  
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement ONLINE PRODUCT FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 19 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 20.00

Transaction ID : SB17.I456

Memo Item

**B. REVV FUNDRAISING PLATFORM**

Full Name (Last, First, Middle Initial)  
Mailing Address 1776 WILSON BLVD.  
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement ONLINE PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 19 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 1.50

Transaction ID : SB17.I466

Memo Item

**C. WINRED TECHNICAL SERVICES LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement ONLINE PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 19 / 2020

FEC Identification Number: C C00694323

Amount of Each Disbursement this Period: 20.05

Transaction ID : SB17.I430

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 41.55

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 114			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. NATIONAL MEDIA RESEARCH, PLANNING &amp; PLACEMENT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2020
Mailing Address 817 SLATERS LANE		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement ONLINE ADVERTISING		Amount of Each Disbursement this Period 23.00
Candidate Name		Transaction ID : SB17.I501
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. REVV FUNDRAISING PLATFORM</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2020
Mailing Address 1776 WILSON BLVD. SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement ONLINE PROCESSING FEE		Amount of Each Disbursement this Period 1.50
Candidate Name		Transaction ID : SB17.I502
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. REVV FUNDRAISING PLATFORM</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2020
Mailing Address 1776 WILSON BLVD. SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement ONLINE PRODUCT FEE		Amount of Each Disbursement this Period 22.00
Candidate Name		Transaction ID : SB17.I503
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	46.50
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 114	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number <b>C</b> C00694323	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 246.87	
Purpose of Disbursement ONLINE PROCESSING FEE		Category/ Type	Transaction ID : <b>SB17.I499</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number <b>C</b> C00694323	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 212.95	
Purpose of Disbursement ONLINE PROCESSING FEE		Category/ Type	Transaction ID : <b>SB17.I500</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. ANEDOT, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2020	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number <b>C</b>	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 330.46	
Purpose of Disbursement ONLINE PROCESSING FEE		Category/ Type	Transaction ID : <b>SB17.I510</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	790.28
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 114	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. NATIONAL MEDIA RESEARCH, PLANNING &amp; PLACEMENT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2020
Mailing Address 817 SLATERS LANE		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement ONLINE ADVERTISING	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 2.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I504
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ONMESSAGE INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2020
Mailing Address 817 SLATERS LANE		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement DIGITAL ADVERTISING	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 75000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I473
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ONMESSAGE INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2020
Mailing Address 817 SLATERS LANE		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement PRINTING CARDS	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1826.88	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I474
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	76828.88
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 114	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number <b>C</b> C00694323	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 71.33	
Purpose of Disbursement ONLINE PROCESSING FEE		Category/ Type	Transaction ID : <b>SB17.I505</b>	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. VAN ORDEN, DERRICK, F., MR.,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2020	
Mailing Address PO BOX 824			FEC Identification Number <b>C</b> C00742007	
City CHIPPEWA FALLS	State WI	Zip Code 54729	Amount of Each Disbursement this Period 1247.00	
Purpose of Disbursement TEXTING REIMBURSEMENT		Category/ Type	Transaction ID : <b>SB17.I478</b>	
Candidate Name <b>VAN ORDEN, DERRICK, F., MR.,</b>		Memo Item <input type="checkbox"/> REPORTED AS IN-KIND ON SCHEDULE A		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: WI District: 03				

Full Name (Last, First, Middle Initial) <b>C. RUMBLE, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2020	
Mailing Address 2101 L STREET NORTHWEST			FEC Identification Number <b>C</b>	
City WASHINGTON	State DC	Zip Code 20037	Amount of Each Disbursement this Period 100.00	
Purpose of Disbursement TEXTING		Category/ Type	Transaction ID : <b>SB17.I479</b>	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1318.33
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 108 OF 114	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. RUMBLE, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2020
Mailing Address 2101 L STREET NORTHWEST		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20037
Purpose of Disbursement TEXTING		Amount of Each Disbursement this Period 1147.00
Candidate Name		Transaction ID : SB17.I480
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VAN ORDEN, DERRICK, F., MR.,</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2020
Mailing Address PO BOX 824		FEC Identification Number C C00742007
City CHIPPEWA FALLS	State WI	Zip Code 54729
Purpose of Disbursement TRAVEL REIMBURSEMENT		Amount of Each Disbursement this Period 451.94
Candidate Name <b>VAN ORDEN, DERRICK, F., MR.,</b>		Transaction ID : SB17.I514
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: WI District: 03		

Full Name (Last, First, Middle Initial) <b>C. HOLIDAY INN</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2020
Mailing Address 200 PEARL STREET		FEC Identification Number C
City LA CROSSE	State WI	Zip Code 54601
Purpose of Disbursement TRAVEL		Amount of Each Disbursement this Period 113.62
Candidate Name		Transaction ID : SB17.I515
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	451.94
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 114	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2020	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 19.30	
Purpose of Disbursement ONLINE PROCESSING FEE		Category/ Type	Transaction ID : SB17.I523	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. NORTH SHORE VALET</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2020	
Mailing Address 14007 NORTH PORT WASHINGTON ROAD			FEC Identification Number C	
City MEQUON	State WI	Zip Code 53097	Amount of Each Disbursement this Period 400.00	
Purpose of Disbursement EVENT VALET SERVICE		Category/ Type	Transaction ID : SB17.I506	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. ONMESSAGE INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2020	
Mailing Address 817 SLATERS LANE			FEC Identification Number C	
City ALEXANDRIA	State VA	Zip Code 22314	Amount of Each Disbursement this Period 12300.00	
Purpose of Disbursement MEDIA PRODUCTION		Category/ Type	Transaction ID : SB17.I513	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	12719.30
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 110 OF 114	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

**A. REVV FUNDRAISING PLATFORM**

Full Name (Last, First, Middle Initial)  
Mailing Address 1776 WILSON BLVD.  
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement ONLINE PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 22 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 1.70

Transaction ID : SB17.I508

Memo Item

**B. REVV FUNDRAISING PLATFORM**

Full Name (Last, First, Middle Initial)  
Mailing Address 1776 WILSON BLVD.  
SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement ONLINE PRODUCT FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 22 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 23.00

Transaction ID : SB17.I509

Memo Item

**C. WINRED TECHNICAL SERVICES LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement ONLINE PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 22 / 2020

FEC Identification Number: C C00694323

Amount of Each Disbursement this Period: 69.82

Transaction ID : SB17.I507

Memo Item

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 94.52

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 111 OF 114	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number <b>C</b> C00694323	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 106.70	
Purpose of Disbursement ONLINE PROCESSING FEE		Category/ Type	Transaction ID : <b>SB17.I522</b>	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number <b>C</b>	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number <b>C</b>	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	106.70
<b>TOTAL</b> This Period (last page this line number only).....▶	266487.71

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

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

Mailing Address 4291 ARISTA ST.

City SAN DIEGO    State CA    Zip Code 92103-1055

Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought:  House     Senate     President  
 Primary     General  
 Other (specify) ▼

Disbursement For: 2020

State:    District:

Date of Disbursement  
M M / D D / Y Y Y Y  
07 / 13 / 2020

FEC Identification Number  
C

Amount of Each Disbursement this Period  
- 19400.00

Transaction ID : SB20A.1475

Memo Item VOID CHECK 6/16/20. RE-ISSUED 7/13/20

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

Mailing Address 4291 ARISTA ST.

City SAN DIEGO    State CA    Zip Code 92103-1055

Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought:  House     Senate     President  
 Primary     General  
 Other (specify) ▼

Disbursement For: 2020

State:    District:

Date of Disbursement  
M M / D D / Y Y Y Y  
07 / 13 / 2020

FEC Identification Number  
C

Amount of Each Disbursement this Period  
19400.00

Transaction ID : SB20A.1476

Memo Item RE-ISSUED LOST CHECK

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

Mailing Address

City    State    Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House     Senate     President  
 Primary     General  
 Other (specify) ▼

Disbursement For:

State:    District:

Date of Disbursement  
M M / D D / Y Y Y Y

FEC Identification Number  
C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	0.00



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

NAME OF COMMITTEE (In Full)  
**Van Orden for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>VAN ORDEN, DERRICK, F., MR.,</b>			Nature of Debt (Purpose): TRAVEL
Mailing Address PO BOX 824			
City CHIPPEWA FALLS	State WI	Zip Code 54729	

Outstanding Balance Beginning This Period 480.13	Transaction ID : SD10.10	
Amount Incurred This Period 1356.44	Payment This Period 8.97	Outstanding Balance at Close of This Period 1827.60

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>VAN ORDEN, DERRICK, F., MR.,</b>			Nature of Debt (Purpose): TRAINING
Mailing Address PO BOX 824			
City CHIPPEWA FALLS	State WI	Zip Code 54729	

Outstanding Balance Beginning This Period 240.00	Transaction ID : SD10.8	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 240.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>VAN ORDEN, DERRICK, F., MR.,</b>			Nature of Debt (Purpose): WEB SERVICES AND INTERNET EXPENSE
Mailing Address PO BOX 824			
City CHIPPEWA FALLS	State WI	Zip Code 54729	

Outstanding Balance Beginning This Period 2071.79	Transaction ID : SD10.9	
Amount Incurred This Period 322.48	Payment This Period 0.00	Outstanding Balance at Close of This Period 2394.27

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	4461.87
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	

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

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER:  
 (check only one)  9  
 10

NAME OF COMMITTEE (In Full)

**Van Orden for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Kirstin Hopkins Inc.**

Nature of Debt (Purpose):  
 TRAVEL/EVENT/SHIPPING

Mailing Address 7110 Greenbrook Ln.

City Dallas	State TX	Zip Code 75214
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Outstanding Balance Beginning This Period

Transaction ID : SD10.11

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

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

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

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

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

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

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ▶

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶