

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 148 East Johnson Street  
Check if different than previously reported. (ACC) Madison WI 53703

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C C00074450 3. IS THIS REPORT NEW (N) OR AMENDED (A)  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M M / D D D / Y Y Y Y Y Y in the State of  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 09 / 01 / 2014 through 09 / 30 / 2014

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

Type or Print Name of Treasurer Mike Jones

Signature of Treasurer Mike Jones [Electronically Filed] Date 03 / 27 / 2015

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Republican Party of Wisconsin**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		<input type="text" value="1152918.89"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="873982.29"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="662206.00"/>	<input type="text" value="3291211.60"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="1536188.29"/>	<input type="text" value="4444130.49"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="777089.63"/>	<input type="text" value="3685031.83"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="759098.66"/>	<input type="text" value="759098.66"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Republican Party of Wisconsin**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	168360.53	896352.53
(ii) Unitemized .....	298988.65	1574579.52
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	467349.18	2470932.05
(b) Political Party Committees .....	300.00	376650.00
(c) Other Political Committees (such as PACs).....	20500.00	162300.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	488149.18	3009882.05
12. Transfers From Affiliated/Other Party Committees.....	161100.00	257150.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	1000.00	6590.32
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	5232.41
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	400.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	11956.82	11956.82
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	11956.82	11956.82
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	662206.00	3291211.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	650249.18	3279254.78

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	2110.03	2110.03
(ii) Non-Federal Share.....	11956.82	11956.82
(b) Other Federal Operating Expenditures .....	641896.52	2446207.89
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	655963.37	2460274.74
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	15035.00	25235.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	15035.00	25235.00
29. Other Disbursements .....	0.00	111072.55
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	106091.26	1088449.54
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	106091.26	1088449.54
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	777089.63	3685031.83
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	765132.81	3673075.01

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	488149.18	3009882.05
34. Total Contribution Refunds (from Line 28(d)) .....	15035.00	25235.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	473114.18	2984647.05
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	644006.55	2448317.92
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1000.00	6590.32
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	643006.55	2441727.60

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

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

FOR LINE NUMBER: PAGE 6 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **E2480 QUAIL RUN**

City **EAU CLAIRE**      State **WI**      Zip Code **54701-9451**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**09 / 02 / 2014**

**Transaction ID : SA11.936558**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

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

Mailing Address **P.O. BOX 684**

City **CLYDE**      State **TX**      Zip Code **79510-0684**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt  
**09 / 02 / 2014**

**Transaction ID : SA11.936792**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

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

Mailing Address **550 OLD WAGON ROAD**

City **SEYMOUR**      State **TN**      Zip Code **37865-4906**

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

Name of Employer      Occupation  
**INFORMATION REQUESTED PER BEST EFFORTS**      **FARMER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**215.00**

Date of Receipt  
**09 / 02 / 2014**

**Transaction ID : SA11.936799**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

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

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

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

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

FOR LINE NUMBER: PAGE 7 OF 323  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **815A HILLTOP AVE. EXTENSION**

City <b>ABINGDON</b>	State <b>MD</b>	Zip Code <b>21009-1306</b>
-------------------------	--------------------	-------------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **606.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09	/	02	/	2014

**Transaction ID : SA11.936528**

Amount of Each Receipt this Period  

85.00
-------

**CONTRIBUTION**

Full Name (Last, First, Middle Initial)  
**B. FRANK J. COYNE JR.**

Mailing Address **41 GORWIN DRIVE**

City <b>HANSON</b>	State <b>MA</b>	Zip Code <b>02341-1309</b>
-----------------------	--------------------	-------------------------------

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

Name of Employer <b>SHAW'S SUPERMARKETS</b>	Occupation <b>GROCERY CLERK</b>
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **560.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09	/	02	/	2014

**Transaction ID : SA11.936816**

Amount of Each Receipt this Period  

50.00
-------

**CONTRIBUTION**

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

Mailing Address **P.O. BOX 885**

City <b>WEST SALEM</b>	State <b>WI</b>	Zip Code <b>54669-0885</b>
---------------------------	--------------------	-------------------------------

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

Name of Employer <b>SELF EMPLOYED</b>	Occupation <b>ATTORNEY</b>
--	-------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09	/	02	/	2014

**Transaction ID : SA11.936340**

Amount of Each Receipt this Period  

100.00
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**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>235.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 323
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 221 NORTH BOULEVARD

City SALISBURY State MD Zip Code 21801-6217

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 02 / 2014

**Transaction ID : SA11.936699**

Amount of Each Receipt this Period  
 50.00

CONTRIBUTION

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

Mailing Address 12330 SCARCELLA LN

City STAFFORD State TX Zip Code 77477-1610

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

Name of Employer SELF Occupation CONSULTING GEOLOGIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.90

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 02 / 2014

**Transaction ID : SA11.936212**

Amount of Each Receipt this Period  
 26.14

CONTRIBUTION

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

Mailing Address 599 BRAYBARTON BOULEVARD

City STEUBENVILLE State OH Zip Code 43952-2447

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 02 / 2014

**Transaction ID : SA11.935811**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1076.14
<b>TOTAL</b> This Period (last page this line number only).....	



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

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

FOR LINE NUMBER: PAGE 9 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. SHARON LARSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 606 W CRAMER STREET  
 City State Zip Code  
 FORT ATKINSON WI 53538-1041  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 02 / 2014  
**Transaction ID : SA11.936660**  
 Amount of Each Receipt this Period  
 110.00  
 CONTRIBUTION

**B. CARL LAWYER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1423 4TH STREET  
 City State Zip Code  
 MARYSVILLE WA 98270-5036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 PACIFIC GRINDING WHEEL COMPANY KILN OPERATOR  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 02 / 2014  
**Transaction ID : SA11.936108**  
 Amount of Each Receipt this Period  
 80.00  
 CONTRIBUTION

**C. J WILLIAM LITTLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6663 ARMITOS DR  
 City State Zip Code  
 CAMARILLO CA 93012-8828  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 02 / 2014  
**Transaction ID : SA11.936201**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 440.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 10 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. EDWARD S. MARTIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1046 WOODBERRY ROAD  
 City NEW KENSINGTON State PA Zip Code 15068-5308  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 02 / 2014  
**Transaction ID : SA11.936844**  
 Amount of Each Receipt this Period 150.00  
 CONTRIBUTION

**B. GEORGE HOWARD MARTIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3216 BRITTANY PTE  
 City LANSDALE State PA Zip Code 19446-6544  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 02 / 2014  
**Transaction ID : SA11.936214**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**C. CLAYTON J. MORGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 38026 SHERWOOD STREET  
 City WESTLAND State MI Zip Code 48185-3744  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 02 / 2014  
**Transaction ID : SA11.936696**  
 Amount of Each Receipt this Period 30.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 280.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 11 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 9630 WOODLAND RD.

City State Zip Code  
 NEW MARKET MD 21774-2944

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

Name of Employer Occupation  
 RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 09 / 02 / 2014  
**Transaction ID : SA11.936803**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. S JAMES NELSON JR.**

Mailing Address 1708 WASHINGTON AVENUE SUITE H

City State Zip Code  
 HOUSTON TX 77007-7773

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

Name of Employer Occupation  
 RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 09 / 02 / 2014  
**Transaction ID : SA11.936258**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

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

Mailing Address 14515 W GRANITE VALLEY DR APT E567

City State Zip Code  
 SUN CITY WEST AZ 85375-6024

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

Name of Employer Occupation  
 RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 09 / 02 / 2014  
**Transaction ID : SA11.936477**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00

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

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

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

FOR LINE NUMBER: PAGE 12 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 1417 MAHLER BLVD

City State Zip Code  
NEENAH WI 54956-4974

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 02 / 2014  
**Transaction ID : SA11.936415**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

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

Mailing Address 1052 ANZA DR

City State Zip Code  
PACIFICA CA 94044-3314

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 02 / 2014  
**Transaction ID : SA11.936065**

Amount of Each Receipt this Period  
80.00

CONTRIBUTION

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

Mailing Address 1072 288TH AVE

City State Zip Code  
BURLINGTON WI 53105-9304

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 02 / 2014  
**Transaction ID : SA11.935255**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 280.00

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

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

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

FOR LINE NUMBER: PAGE 13 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **3601 CAMP PHILLIPS ROAD**

City **SCHOFIELD** State **WI** Zip Code **54476-1567**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**09 / 02 / 2014**  
**Transaction ID : SA11.935540**

Amount of Each Receipt this Period  
**300.00**

CONTRIBUTION

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

Mailing Address **726 FARWELL DR**

City **MADISON** State **WI** Zip Code **53704-6032**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt  
**09 / 02 / 2014**  
**Transaction ID : SA11.935126**

Amount of Each Receipt this Period  
**200.00**

CONTRIBUTION

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

Mailing Address **3108 CAMINO DE LA SIERRA**

City **ALBUQUERQUE** State **NM** Zip Code **87111-5604**

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

Name of Employer **LZ TECHNOLOGY** Occupation **ENGINEER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt  
**09 / 02 / 2014**  
**Transaction ID : SA11.936527**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **600.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 323
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **6 SHEFFORD CIRCLE**

City **MADISON** State **WI** Zip Code **53719-1415**

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

Name of Employer **SELF EMPLOYED** Occupation **FINANCE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1750.00**

Date of Receipt **09 / 02 / 2014**

**Transaction ID : SA11.936511**

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

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

Mailing Address **8614 N 56TH STREET**

City **BROWN DEER** State **WI** Zip Code **53223-3024**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt **09 / 02 / 2014**

**Transaction ID : SA11.936240**

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

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

Mailing Address **8240 HEALY DR**

City **MOBILE** State **AL** Zip Code **36695-4919**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt **09 / 03 / 2014**

**Transaction ID : SA11.935344**

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► **375.00**

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

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

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

FOR LINE NUMBER: PAGE 15 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. MS. RUTH E. ALT**

Mailing Address **810 W CLOVERNOOK LANE**

City State Zip Code  
**GLENDALE WI 53217-4122**

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

Name of Employer Occupation  
**KORTHAUSER AND SONS GROWER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**350.00**

Date of Receipt  
**09 / 03 / 2014**

**Transaction ID : SA11.936769**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

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

Mailing Address **1302 24TH ST W #329**

City State Zip Code  
**BILLINGS MT 59102-3861**

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

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**400.00**

Date of Receipt  
**09 / 03 / 2014**

**Transaction ID : SA11.935469**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MS. VIOLET JEAN ANDERSON**

Mailing Address **5700 CAMBRIDGE CIRCLE BUILDING 16**

City State Zip Code  
**MOUNT PLEASANT WI 53406-2858**

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

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**350.00**

Date of Receipt  
**09 / 03 / 2014**

**Transaction ID : SA11.936672**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **300.00**

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

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

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

FOR LINE NUMBER: PAGE 16 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. JUDITH ATKINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address N7856 CARVER SCHOOL ROAD  
 City EAST TROY State WI Zip Code 53120-2539  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936837**  
 Amount of Each Receipt this Period  
 140.00  
 CONTRIBUTION

**B. JEANNE S. BARNES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 165 CHRISTOPHER STREET APT 6 CC  
 APT 6 CC  
 City NEW YORK State NY Zip Code 10014-2803  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 510.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936813**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

**C. MS. MEREDITH BERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 914 SALLY'S ALLEY N  
 City HUDSON State WI Zip Code 54016-1176  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936763**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 240.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

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

FOR LINE NUMBER: PAGE 17 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 3720 GLEN CREST COURT

City State Zip Code  
EAU CLAIRE WI 54701-5615

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFORTS UNKNOWN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936312**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

Mailing Address 6318 WOODMAN DRIVE

City State Zip Code  
OROVILLE CA 95966-3844

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936805**

Amount of Each Receipt this Period  
75.00

CONTRIBUTION

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

Mailing Address P.O. BOX 233

City State Zip Code  
PARK FALLS WI 54552-0233

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

Name of Employer Occupation  
Self-Employed Physician

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936737**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 525.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 29710 NIAGARA COURT

City State Zip Code  
ENGLEWOOD FL 34223-3971

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936697**

Amount of Each Receipt this Period  
60.00

CONTRIBUTION

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

Mailing Address P.O. BOX 146

City State Zip Code  
SAYNER WI 54560-0146

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1050.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.935608**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

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

Mailing Address 13316 WESTBURY WAY

City State Zip Code  
GOSHEN KY 40026-8421

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936797**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1160.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 323
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. EUGENE CARR</b>		Date of Receipt MM / DD / YYYY 09 / 03 / 2014 <b>Transaction ID : SA11.935347</b>
Mailing Address 875 18TH AVE S		Amount of Each Receipt this Period 250.00
City NAPLES	State FL	Zip Code 34102-7542
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 485.00	

Full Name (Last, First, Middle Initial) <b>B. HAROLD CHARLIER</b>		Date of Receipt MM / DD / YYYY 09 / 03 / 2014 <b>Transaction ID : SA11.936598</b>
Mailing Address 2128 BROKEN HILL RD		Amount of Each Receipt this Period 100.00
City WAUKESHA	State WI	Zip Code 53188-7512
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer NATIONAL SURVEY	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. WALTER H. CLAIBORNE III</b>		Date of Receipt MM / DD / YYYY 09 / 03 / 2014 <b>Transaction ID : SA11.936814</b>
Mailing Address 14217 CLAIBORNE ROAD		Amount of Each Receipt this Period 200.00
City BATCHELOR	State LA	Zip Code 70715-3514
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer SELF EMPLOYED	Occupation REAL ESTATE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 20 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **304 STALLION PLACE**

City **BONITA** State **CA** Zip Code **91902-2321**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**09 / 03 / 2014**  
**Transaction ID : SA11.936748**

Amount of Each Receipt this Period  
**40.00**

CONTRIBUTION

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

Mailing Address **N71W13876 NICOLET COURT**

City **MENOMONEE FALLS** State **WI** Zip Code **53051-5249**

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

Name of Employer **WI DEPT OF TRANS** Occupation **ENGINEERING TECH**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
**09 / 03 / 2014**  
**Transaction ID : SA11.936611**

Amount of Each Receipt this Period  
**75.00**

CONTRIBUTION

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

Mailing Address **P.O. BOX 134**

City **WILLIAMSTON** State **MI** Zip Code **48895-0134**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**09 / 03 / 2014**  
**Transaction ID : SA11.935871**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► **165.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 323
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 5434 TOYON ROAD

City SAN DIEGO State CA Zip Code 92115-1017

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
405.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014

**Transaction ID : SA11.936636**

Amount of Each Receipt this Period  
105.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MS. MARILYN A. FRALICH**

Mailing Address 5605 CAMBRIDGE LANE UNIT 3

City MOUNT PLEASANT State WI Zip Code 53406-2889

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014

**Transaction ID : SA11.936730**

Amount of Each Receipt this Period  
60.00

CONTRIBUTION

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

Mailing Address 1212 SYCAMORE STREET

City TURLOCK State CA Zip Code 95380-4147

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014

**Transaction ID : SA11.936822**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	215.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 22 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 430 N VINEDO AVENUE

City PASADENA State CA Zip Code 91107-2615

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936539**

Amount of Each Receipt this Period  
160.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. FRANK W. GORMAN JR.**

Mailing Address 1606 DEDE LANE

City EL PASO State TX Zip Code 79902-2201

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936845**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

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

Mailing Address P.O. BOX 728

City ELIZABETHTOWN State KY Zip Code 42702-0728

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
410.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936817**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 360.00

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

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

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

FOR LINE NUMBER: PAGE 23 OF 323  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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

NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. TWUKASA HATAKEYAMA**  
Full Name (Last, First, Middle Initial)  
Mailing Address **285 OXFORD STREET APT 2 B**  
**APT 2 B**  
City **ROCHESTER** State **NY** Zip Code **14607-2774**  
FEC ID number of contributing federal political committee. **C**  
Name of Employer **RETIRED** Occupation **RETIRED**  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **750.00**

Date of Receipt  
**09 / 03 / 2014**  
**Transaction ID : SA11.936847**  
Amount of Each Receipt this Period  
**500.00**  
CONTRIBUTION

**B. BRIAN S. HEIMSOTH**  
Full Name (Last, First, Middle Initial)  
Mailing Address **1416 KINGS LYNN RD**  
City **STOUGHTON** State **WI** Zip Code **53589-4906**  
FEC ID number of contributing federal political committee. **C**  
Name of Employer **RETIRED** Occupation **RETIRED**  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**09 / 03 / 2014**  
**Transaction ID : SA11.935819**  
Amount of Each Receipt this Period  
**250.00**  
CONTRIBUTION

**C. JOHN HILL**  
Full Name (Last, First, Middle Initial)  
Mailing Address **22455 COUNTY ROAD M**  
City **GRANTSBURG** State **WI** Zip Code **54840-8016**  
FEC ID number of contributing federal political committee. **C**  
Name of Employer **RETIRED** Occupation **RETIRED**  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **405.00**

Date of Receipt  
**09 / 03 / 2014**  
**Transaction ID : SA11.936780**  
Amount of Each Receipt this Period  
**105.00**  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>855.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 24 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 12480 GREEN MEADOW PLACE

City State Zip Code  
ELM GROVE WI 53122-1931

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

Name of Employer Occupation  
MEDICAL COLLEGE OF WISCONSIN PHYSICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.935551**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. HOWARD E. JACQUES**

Mailing Address 602 PHOEBE SREET

City State Zip Code  
GREEN BAY WI 54303-3566

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936364**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

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

Mailing Address W1936 TULETA HILL ROAD

City State Zip Code  
MARKESAN WI 53946-8653

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936830**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.00

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



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

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

FOR LINE NUMBER: PAGE 25 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. MR. GENE J. KIRK**

Mailing Address 309 ROOSEVELT ST

City State Zip Code  
RIVER FALLS WI 54022-1431

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.935207**

Amount of Each Receipt this Period  
75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. DAVID J. KLEINDL**

Mailing Address 1222 WEST CIRCLE DRIVE

City State Zip Code  
BEAVER DAM WI 53916-1208

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936731**

Amount of Each Receipt this Period  
80.00

CONTRIBUTION

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

Mailing Address 331 PEACH STREET

City State Zip Code  
CINCINNATI OH 45246-3509

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

Name of Employer Occupation  
DATACEUTICS SAS PROGRAMMER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
208.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.935569**

Amount of Each Receipt this Period  
27.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 182.00

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

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

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

FOR LINE NUMBER: PAGE 26 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 10725 BRAEWOOD CIR

City State Zip Code  
BLOOMINGTON MN 55437-2758

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
315.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.935873**

Amount of Each Receipt this Period  
115.00

CONTRIBUTION

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

Mailing Address 15315 TURNBERRY DR

City State Zip Code  
BROOKFIELD WI 53005-2674

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.935214**

Amount of Each Receipt this Period  
300.00

CONTRIBUTION

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

Mailing Address 1600 TURTLE CREEK LANE APT 3

City State Zip Code  
PAMPA TX 79065-4902

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:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.935993**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 515.00

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

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

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

FOR LINE NUMBER: PAGE 27 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. BARBARA LUCAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14315 W ROGERS DRIVE  
 City NEW BERLIN State WI Zip Code 53151-2459  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CENTURY FENCE Occupation VP-SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 03 / 2014  
**Transaction ID : SA11.936372**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**B. MRS. VICTORIA M. MAASKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address W5029 STATE ROAD 33  
 City HORICON State WI Zip Code 53032-9709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation LAND OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 03 / 2014  
**Transaction ID : SA11.936773**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**C. WALTER MARIETTA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 85240  
 City RACINE State WI Zip Code 53408-5240  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 03 / 2014  
**Transaction ID : SA11.936836**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 28 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 5704 JUNONIA COURT

City State Zip Code  
FORT MYERS FL 33908-1667

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936846**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

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

Mailing Address 6945 WEST SURREY AVENUE

City State Zip Code  
PEORIA AZ 85381-5011

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
340.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936796**

Amount of Each Receipt this Period  
100.94

CONTRIBUTION

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

Mailing Address 1077 RIVER ROAD, APT 201

City State Zip Code  
EDGEWATER NJ 07020-1353

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936592**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 800.94

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

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

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

FOR LINE NUMBER: PAGE 29 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 1560 NORTH OCOEE STREET

City State Zip Code  
CLEVELAND TN 37311-4466

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

Name of Employer Occupation  
CLAN MONTGOMERY SOCIETY VICE PRESIDENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936717**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

Mailing Address 38026 SHERWOOD STREET

City State Zip Code  
WESTLAND MI 48185-3744

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936809**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

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

Mailing Address 875 HAMPTONSHIRE DRIVE

City State Zip Code  
CLEVES OH 45002-

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936851**

Amount of Each Receipt this Period  
150.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00

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

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

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

FOR LINE NUMBER: PAGE 30 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 30 OENOKE LANE

City State Zip Code  
NEW CANAAN CT 06840-4515

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936852**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. HORACE H. PALMER**

Mailing Address 5040 N KENT AVENUE

City State Zip Code  
WHITEFISH BAY WI 53217-5520

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936105**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. HORACE H. PALMER**

Mailing Address 5040 N KENT AVENUE

City State Zip Code  
WHITEFISH BAY WI 53217-5520

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936254**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00

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

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

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

FOR LINE NUMBER: PAGE 31 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. TRACY PAPANDREA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address N28W30628 RED FOX CT  
 City PEWAUKEE State WI Zip Code 53072-4292  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 03 / 2014  
**Transaction ID : SA11.935486**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**B. AVOLINE POFF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1701 PINE EDGE LANE  
 City HENRICO State VA Zip Code 23229-4069  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt 09 / 03 / 2014  
**Transaction ID : SA11.936787**  
 Amount of Each Receipt this Period 40.00  
 CONTRIBUTION

**C. WILLIAM H. POPE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 540 WEST SMUGGLER STREET  
 City ASPEN State CO Zip Code 81611-1261  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED PER BEST EFF( Occupation INFORMATION REQUESTED PER BEST EFF  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 03 / 2014  
**Transaction ID : SA11.936755**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 540.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 32 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. MR. ROBERT J. RADTKE**

Mailing Address **S2923 MAPLE LANE**

City **MARSHFIELD**      State **WI**      Zip Code **54449-9400**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**265.00**

Date of Receipt  
**09 / 03 / 2014**

**Transaction ID : SA11.935226**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

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

Mailing Address **457 NW GIBRALTAR COURT**

City **PORT SAINT LUCIE**      State **FL**      Zip Code **34986-1733**

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

Name of Employer **HOMEMAKER**      Occupation **HOMEMAKER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**410.00**

Date of Receipt  
**09 / 03 / 2014**

**Transaction ID : SA11.936703**

Amount of Each Receipt this Period  
**210.00**

CONTRIBUTION

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

Mailing Address **700 QUINLEN DR APT 338**

City **PEWAUKEE**      State **WI**      Zip Code **53072-1832**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**395.00**

Date of Receipt  
**09 / 03 / 2014**

**Transaction ID : SA11.936154**

Amount of Each Receipt this Period  
**35.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **295.00**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 323
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 1220 EASTHILL DRIVE

City WAUSAU State WI Zip Code 54403-9223

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936834**

Amount of Each Receipt this Period  
 400.00

CONTRIBUTION

**B. TUULI-ANN RISTKOK**  
Full Name (Last, First, Middle Initial)

Mailing Address 16 W 16TH STREET APT 6 J N

City NEW YORK State NY Zip Code 10011-6328

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936560**

Amount of Each Receipt this Period  
 160.00

CONTRIBUTION

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

Mailing Address 6640 BOULDER LN

City MIDDLETON State WI Zip Code 53562-2807

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2014  
**Transaction ID : SA11.936779**

Amount of Each Receipt this Period  
 40.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 34 OF 323  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. MR. THOMAS ROGERS**  
Full Name (Last, First, Middle Initial)  
Mailing Address W1194 COUNTY ROAD J  
City PRINCETON State WI Zip Code 54968-9342  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NEENAH SPRINGS INC Occupation PRESIDENT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 09 / 03 / 2014  
**Transaction ID : SA11.935258**  
Amount of Each Receipt this Period 2000.00  
CONTRIBUTION

**B. STUART E. SCHLOUGH**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1655 CONNORS ROAD  
City MARSHALL State WI Zip Code 53559-9729  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 09 / 03 / 2014  
**Transaction ID : SA11.936766**  
Amount of Each Receipt this Period 25.00  
CONTRIBUTION

**C. THEODORE SCHMIDT JR.**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2115 E CONNOR PARK COVE  
City SALT LAKE CITY State UT Zip Code 84109-2468  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 03 / 2014  
**Transaction ID : SA11.936538**  
Amount of Each Receipt this Period 100.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2125.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 35 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. JAMES SCHNEIDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1430 MARINE ST  
 City GREEN BAY State WI Zip Code 54301-3051  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 09 / 03 / 2014  
**Transaction ID : SA11.936871**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. GEORGE SCHUEPPERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 467  
 City SISTER BAY State WI Zip Code 54234-0467  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 09 / 03 / 2014  
**Transaction ID : SA11.936768**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**C. KATHLEEN SCHULZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1808 W LOOP 250 N APT 2019  
 City MIDLAND State TX Zip Code 79705-1513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 09 / 03 / 2014  
**Transaction ID : SA11.936826**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 36 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **N75 W27900 SUMMERSTONE ROD**

City State Zip Code  
**HARTLAND WI 53029-9465**

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

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**375.00**

Date of Receipt  
**09 / 03 / 2014**

**Transaction ID : SA11.935607**

Amount of Each Receipt this Period  
**225.00**

CONTRIBUTION

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

Mailing Address **3224 N BARKWOOD LANE**

City State Zip Code  
**APPLETON WI 54914-7232**

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

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**09 / 03 / 2014**

**Transaction ID : SA11.936838**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

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

Mailing Address **2750 KILLARNEY COURT**

City State Zip Code  
**OSHKOSH WI 54904-7306**

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

Name of Employer Occupation  
**RIVERSIDE ENDODONTICS OFFICE MANAGER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**235.00**

Date of Receipt  
**09 / 03 / 2014**

**Transaction ID : SA11.936777**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **525.00**

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

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

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

FOR LINE NUMBER: PAGE 37 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. SUSAN STROTHMANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8106 MILWAUKEE AVENUE  
 City WAUWATOSA State WI Zip Code 53213-2112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 09 / 03 / 2014  
**Transaction ID : SA11.935208**  
 Amount of Each Receipt this Period 220.00  
 CONTRIBUTION

**B. GARY TEEGARDIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2323 BRENT DRIVE  
 City DODGE CITY State KS Zip Code 67801-8447  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SEPC Occupation ELECTRICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 09 / 03 / 2014  
**Transaction ID : SA11.935083**  
 Amount of Each Receipt this Period 10.00  
 CONTRIBUTION

**C. ELIZABETH K. TOULON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 666  
 City KOLOA State HI Zip Code 96756-0666  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 09 / 03 / 2014  
**Transaction ID : SA11.936691**  
 Amount of Each Receipt this Period 60.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 290.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 323
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 324 CHESTNUT HILL COURT  
APT 16

City THOUSAND OAKS State CA Zip Code 91360-3893

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
09 / 03 / 2014  
Transaction ID : SA11.936711

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

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

Mailing Address 333 8TH STREET

City FOND DU LAC State WI Zip Code 54935-5234

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt  
09 / 03 / 2014  
Transaction ID : SA11.936767

Amount of Each Receipt this Period  
70.00

CONTRIBUTION

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

Mailing Address 7760 SANTA ROSA ROAD

City BUELLTON State CA Zip Code 93427-9421

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
09 / 03 / 2014  
Transaction ID : SA11.936734

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 370.00

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

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

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

FOR LINE NUMBER: PAGE 39 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **2707 CLUBLAKE TRAIL**

City State Zip Code  
**MCKINNEY TX 75070-4009**

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

Name of Employer Occupation  
**BRAD WYSONG, MDPA RADIOLOGIST**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**09 / 03 / 2014**

**Transaction ID : SA11.935992**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

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

Mailing Address **9724 ACORN DRIVE**

City State Zip Code  
**SAINT JOHN IN 46373-9524**

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

Name of Employer Occupation  
**RADIATION MEDICINE ASSOCIATES, PC PHYSICIAN**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**09 / 03 / 2014**

**Transaction ID : SA11.936804**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

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

Mailing Address **1434 HIAWATHA DRIVE**

City State Zip Code  
**BEAVER DAM WI 53916-1042**

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

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**360.00**

Date of Receipt  
**09 / 04 / 2014**

**Transaction ID : SA11.936530**

Amount of Each Receipt this Period  
**120.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **420.00**

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

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

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

FOR LINE NUMBER: PAGE 40 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 130 S WATER STREET APT 205

City State Zip Code  
MILWAUKEE WI 53204-4301

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 04 / 2014  
**Transaction ID : SA11.936839**

Amount of Each Receipt this Period  
150.00

CONTRIBUTION

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

Mailing Address P.O. BOX 624

City State Zip Code  
SOUTH BELOIT IL 61080-0624

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
263.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 04 / 2014  
**Transaction ID : SA11.936855**

Amount of Each Receipt this Period  
150.00

CONTRIBUTION

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

Mailing Address N6101 OAKLAND HILLS ROAD

City State Zip Code  
NASHOTAH WI 53058-9731

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 05 / 2014  
**Transaction ID : SA11.948397**

Amount of Each Receipt this Period  
300.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00

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



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

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

FOR LINE NUMBER: PAGE 41 OF 323  
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 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 5 PARTRIDGE HOLLOW RD

City GREENWICH State CT Zip Code 06831-2662

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 09 / 05 / 2014  
**Transaction ID : SA11.937758**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MRS FRANCES CHAPMAN FRIGO**

Mailing Address 1245 OUTWARD AVENUE

City DE PERE State WI Zip Code 54115-1822

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 09 / 05 / 2014  
**Transaction ID : SA11.948307**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

Mailing Address 9360 NORTH SPURCE RD

City RIVER HILLS State WI Zip Code 53217-1131

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
 09 / 05 / 2014  
**Transaction ID : SA11.938771**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00

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

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

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

FOR LINE NUMBER: PAGE 42 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. JEAN DIEFENTHALER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address W5606 COUNTY ROAD EH  
 City State Zip Code  
 ELKHART LAKE WI 53020-1667  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 05 / 2014  
**Transaction ID : SA11.948342**  
 Amount of Each Receipt this Period  
 25.00  
 CONTRIBUTION

**B. MR. LEWIS P. HANSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address W51N602 CEDAR RESERVE CIRCLE  
 City State Zip Code  
 CEDARBURG WI 53012-2134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 05 / 2014  
**Transaction ID : SA11.948323**  
 Amount of Each Receipt this Period  
 300.00  
 CONTRIBUTION

**C. ANGELINE J. HARING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 825 ALEXANDER RD W  
 City State Zip Code  
 BELLVILLE OH 44813-8900  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 05 / 2014  
**Transaction ID : SA11.938774**  
 Amount of Each Receipt this Period  
 55.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 380.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 837 S PARK TRAIL DR

City State Zip Code  
CARMEL IN 46032-4219

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 05 / 2014  
**Transaction ID : SA11.938775**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. JAMES T. LUNDBERG**

Mailing Address 1036 EASTHILL PLACE

City State Zip Code  
WAUSAU WI 54403-9222

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 05 / 2014  
**Transaction ID : SA11.948448**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

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

Mailing Address 13485 BRAEMAR DRIVE

City State Zip Code  
ELM GROVE WI 53122-2508

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 05 / 2014  
**Transaction ID : SA11.948360**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00

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

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

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

FOR LINE NUMBER: PAGE 44 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 16 RIVERS CT

City State Zip Code  
OAK RIDGE TN 37830-7275

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 05 / 2014  
**Transaction ID : SA11.938805**

Amount of Each Receipt this Period  
30.00

CONTRIBUTION

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

Mailing Address 2464 BEAR DEN RD

City State Zip Code  
FREDERICK MD 21701-9319

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 05 / 2014  
**Transaction ID : SA11.937764**

Amount of Each Receipt this Period  
55.00

CONTRIBUTION

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

Mailing Address P O BOX 195429

City State Zip Code  
DALLAS TX 75219-8607

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

Name of Employer Occupation  
SELF EMPLOYED OIL AND GAS

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 05 / 2014  
**Transaction ID : SA11.936907**

Amount of Each Receipt this Period  
10000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 10085.00

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

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

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

FOR LINE NUMBER: PAGE 45 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. MR. DANIEL R. SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 240 SEMINOLE LANE  
 City GREEN BAY State WI Zip Code 54313-4950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 05 / 2014  
**Transaction ID : SA11.948445**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**B. GARY TEEGARDIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2323 BRENT DRIVE  
 City DODGE CITY State KS Zip Code 67801-8447  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SEPC Occupation ELECTRICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 09 / 05 / 2014  
**Transaction ID : SA11.938234**  
 Amount of Each Receipt this Period 10.00  
 CONTRIBUTION

**C. D W. TORGERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1312 WISCONSIN STREET APT 229  
 City HUDSON State WI Zip Code 54016-1850  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 05 / 2014  
**Transaction ID : SA11.948322**  
 Amount of Each Receipt this Period 50.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 160.00  
**TOTAL** This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 46 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **3819 SOUTH 18TH STREET**

City **SHEBOYGAN** State **WI** Zip Code **53081-7111**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt  
**09 / 05 / 2014**  
**Transaction ID : SA11.948334**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

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

Mailing Address **19355 CYPRESS RIDGE TER UNIT 806**

City **LEESBURG** State **VA** Zip Code **20176-6916**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**09 / 05 / 2014**  
**Transaction ID : SA11.937771**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

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

Mailing Address **2335 PATRIOT LANE**

City **OSHKOSH** State **WI** Zip Code **54904-6928**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **445.00**

Date of Receipt  
**09 / 05 / 2014**  
**Transaction ID : SA11.948470**

Amount of Each Receipt this Period  
**35.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► **235.00**

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

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

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

FOR LINE NUMBER: PAGE 47 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 12502 SWEET LEAF TERRACE

City State Zip Code  
FAIRFAX VA 22033-2461

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2014  
**Transaction ID : SA11.938572**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

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

Mailing Address 54894 300TH ST.

City State Zip Code  
AUSTIN MN 55912-6596

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2014  
**Transaction ID : SA11.937907**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

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

Mailing Address 1370 CUTLER COURT

City State Zip Code  
MARCO ISLAND FL 34145-5841

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2014  
**Transaction ID : SA11.937428**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

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

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

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

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

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **6 HILLCREST AVENUE**

City **SUMMIT**      State **NJ**      Zip Code **07901-2026**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**240.00**

Date of Receipt  
 /  /   
**09 / 08 / 2014**

**Transaction ID : SA11.938562**

Amount of Each Receipt this Period  
 **50.00**

CONTRIBUTION

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

Mailing Address **308 MAPLE GROVE COURT**

City **CANTON**      State **GA**      Zip Code **30114-9787**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**225.00**

Date of Receipt  
 /  /   
**09 / 08 / 2014**

**Transaction ID : SA11.938574**

Amount of Each Receipt this Period  
 **125.00**

CONTRIBUTION

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

Mailing Address **800 HETHWOOD BLVD**

City **BLACKSBURG**      State **VA**      Zip Code **24060-4207**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
 /  /   
**09 / 08 / 2014**

**Transaction ID : SA11.938361**

Amount of Each Receipt this Period  
 **500.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶  **675.00**

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



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

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

FOR LINE NUMBER: PAGE 49 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. MRS. MARYLYN MENZEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address W7506 SR 106  
 City State Zip Code  
 FT ATKINSON WI 53538-9537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 09 / 08 / 2014  
**Transaction ID : SA11.938376**  
 Amount of Each Receipt this Period  
 30.00  
 CONTRIBUTION

**B. PATRICIA MOLLINO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 515 N BAY AVENUE  
 City State Zip Code  
 MASSAPEQUA NY 11758-2046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 215.00

Date of Receipt  
 09 / 08 / 2014  
**Transaction ID : SA11.937403**  
 Amount of Each Receipt this Period  
 20.00  
 CONTRIBUTION

**C. JAYNE RICKERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 700 QUINLEN DR APT 338  
 City State Zip Code  
 PEWAUKEE WI 53072-1832  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 395.00

Date of Receipt  
 09 / 08 / 2014  
**Transaction ID : SA11.937853**  
 Amount of Each Receipt this Period  
 55.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 105.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 50 OF 323  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. MELVIN A. RIES**  
Mailing Address 3585 ROUND BARN BOULEVARD APT 329  
City State Zip Code  
SANTA ROSA CA 95403-0145  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
RETIRED RETIRED  
Receipt For:  
 Primary    General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
**355.00**

Date of Receipt  
MM / DD / YYYY  
**09 / 08 / 2014**  
**Transaction ID : SA11.937945**  
Amount of Each Receipt this Period  
**25.00**  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. EDWARD H. SCHULZ**  
Mailing Address 108 HOLLY HILL LANE  
City State Zip Code  
BULLARD TX 75757-9378  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFORTS CPA  
Receipt For:  
 Primary    General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
**210.00**

Date of Receipt  
MM / DD / YYYY  
**09 / 08 / 2014**  
**Transaction ID : SA11.937201**  
Amount of Each Receipt this Period  
**110.00**  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. GLENN SMEISKA**  
Mailing Address 2234 S 81ST ST APT 8  
City State Zip Code  
WEST ALLIS WI 53219-1727  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
RETIRED RETIRED  
Receipt For:  
 Primary    General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
**265.00**

Date of Receipt  
MM / DD / YYYY  
**09 / 08 / 2014**  
**Transaction ID : SA11.938606**  
Amount of Each Receipt this Period  
**200.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **335.00**  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 51 OF 323  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. MRS. GLYNNE A. STAFSLIEN MD**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1016 RUTLEDGE COURT  
City JANESVILLE State WI Zip Code 53545-1345  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 610.00

Date of Receipt 09 / 08 / 2014  
**Transaction ID : SA11.937423**  
Amount of Each Receipt this Period 100.00  
CONTRIBUTION

**B. JOHN C. SUTTNER**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 187  
City CHILTON State WI Zip Code 53014-0187  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SUTTNER ACCOUNTING, INC Occupation CPA  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 535.00

Date of Receipt 09 / 08 / 2014  
**Transaction ID : SA11.937655**  
Amount of Each Receipt this Period 35.00  
CONTRIBUTION

**C. GARY TEEGARDIN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2323 BRENT DRIVE  
City DODGE CITY State KS Zip Code 67801-8447  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SEPC Occupation ELECTRICIAN  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 09 / 08 / 2014  
**Transaction ID : SA11.938235**  
Amount of Each Receipt this Period 10.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 145.00  
**TOTAL** This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 52 OF 323  
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 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **4208 NORTH 27TH STREET**

City **TACOMA**      State **WA**      Zip Code **98407-5217**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **410.00**

Date of Receipt  
 /  /   
**09 / 08 / 2014**

**Transaction ID : SA11.937314**

Amount of Each Receipt this Period  
 **60.00**

CONTRIBUTION

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

Mailing Address **12 PLEASANT STREET**

City **BURLINGTON**      State **MA**      Zip Code **01803-2727**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
 /  /   
**09 / 08 / 2014**

**Transaction ID : SA11.938345**

Amount of Each Receipt this Period  
 **30.00**

CONTRIBUTION

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

Mailing Address **172 PLAINVIEW ST**

City **MEMPHIS**      State **TN**      Zip Code **38111-1936**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt  
 /  /   
**09 / 08 / 2014**

**Transaction ID : SA11.938351**

Amount of Each Receipt this Period  
 **90.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶  **180.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 323
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address N1898 BRADLEY ROAD

City POYNETTE State WI Zip Code 53955-8626

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt 09 / 09 / 2014  
**Transaction ID : SA11.937608**

Amount of Each Receipt this Period 100.00

CONTRIBUTION

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

Mailing Address W6470 INDIAN MOUND ROAD

City ADELL State WI Zip Code 53001-1513

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt 09 / 09 / 2014  
**Transaction ID : SA11.938421**

Amount of Each Receipt this Period 300.00

CONTRIBUTION

**C. FREDERICK M. BOWES II**  
Full Name (Last, First, Middle Initial)

Mailing Address 705 WOODLAND ROAD

City KOHLER State WI Zip Code 53044-1223

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

Name of Employer WISCONSIN ADVISORS, LLC Occupation CONSULTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 09 / 2014  
**Transaction ID : SA11.937702**

Amount of Each Receipt this Period 300.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00

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

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

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

FOR LINE NUMBER: PAGE 54 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. CRISTINA FERNANDEZ**  
 Mailing Address 7341 MILLER DRIVE  
 City State Zip Code  
 MIAMI FL 33155-5503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 ARROWMAIL PRESORT Business owner  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2014  
**Transaction ID : SA11.938081**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. LISE M. GOGA**  
 Mailing Address 95 1089 PAEMOKY PLACE  
 City State Zip Code  
 MILILANI HI 96789-6524  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 850.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2014  
**Transaction ID : SA11.937263**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. CHARLES GORDER SR.**  
 Mailing Address 5526 TOYON ROAD  
 City State Zip Code  
 SAN DIEGO CA 92115-1020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 410.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2014  
**Transaction ID : SA11.937429**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 55 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 1015 NUCLEAR ROAD

City MISHICOT      State WI      Zip Code 54228-9427

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

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 09 / 09 / 2014  
**Transaction ID : SA11.937636**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

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

Mailing Address 157 RITCHIE DRIVE

City YONKERS      State NY      Zip Code 10705-4516

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

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
 09 / 09 / 2014  
**Transaction ID : SA11.937264**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

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

Mailing Address 82 STRAWBERRY HILL AVENUE APT 4

City STAMFORD      State CT      Zip Code 06902-2642

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

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 09 / 09 / 2014  
**Transaction ID : SA11.937442**

Amount of Each Receipt this Period  
400.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00

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

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

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

FOR LINE NUMBER: PAGE 56 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **PO BOX 509**

City **CALIPATRIA**      State **CA**      Zip Code **92233-0509**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **355.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 09 / 2014**

**Transaction ID : SA11.937425**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. NANCY P. MC DONALD**

Mailing Address **13140 COUNTRY CLUB DRIVE SOUTHWEST**

City **LAKEWOOD**      State **WA**      Zip Code **98498-5333**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 09 / 2014**

**Transaction ID : SA11.937435**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

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

Mailing Address **12 HAMPSHIRE STREET**

City **EVERETT**      State **MA**      Zip Code **02149-3702**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 09 / 2014**

**Transaction ID : SA11.937426**

Amount of Each Receipt this Period  
**450.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **1050.00**

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



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

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

FOR LINE NUMBER: PAGE 57 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. RICHARD A. MERSKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address N74 W24659 LAUREN DRIVE  
 City SUSSEX State WI Zip Code 53089-5433  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 09 / 2014  
**Transaction ID : SA11.938872**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**B. MR. DAVID E. PACE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address E6918 SKI HILL ROAD  
 City REEDSBURG State WI Zip Code 53959-9200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DEP HOLDINGS Occupation CHAIRMAN OF THE BOARD  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 09 / 2014  
**Transaction ID : SA11.937076**  
 Amount of Each Receipt this Period 200.00  
 CONTRIBUTION

**C. JOHN R. PAUL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 184 NORTHWEST 10TH STREET  
 City MERIDIAN State ID Zip Code 83642-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation SELF  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 09 / 2014  
**Transaction ID : SA11.937256**  
 Amount of Each Receipt this Period 200.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00  
**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 58 OF 323
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 3585 ROUND BARN BOULEVARD APT 329

City	State	Zip Code
SANTA ROSA	CA	95403-0145

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **355.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 09 / 2014

**Transaction ID : SA11.938125**

Amount of Each Receipt this Period  
**25.00**

CONTRIBUTION

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

Mailing Address 8545 CARMEL VALLEY ROAD

City	State	Zip Code
CARMEL	CA	93923-9556

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 09 / 2014

**Transaction ID : SA11.938218**

Amount of Each Receipt this Period  
**75.00**

CONTRIBUTION

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

Mailing Address 1655 CONNORS ROAD

City	State	Zip Code
MARSHALL	WI	53559-9729

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 09 / 2014

**Transaction ID : SA11.937536**

Amount of Each Receipt this Period  
**25.00**

CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 323
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 128 HICKORY NUT LANE

City EDGERTON State WI Zip Code 53534-9318

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2014

**Transaction ID : SA11.937488**

Amount of Each Receipt this Period  
 25.00

CONTRIBUTION

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

Mailing Address 2839 6TH STREET

City EAU CLAIRE State WI Zip Code 54703-2898

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2014

**Transaction ID : SA11.937234**

Amount of Each Receipt this Period  
 10.00

CONTRIBUTION

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

Mailing Address 2045 W HIDDEN RESERVE CIR

City MEQUON State WI Zip Code 53092-5575

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2014

**Transaction ID : SA11.938612**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 135.00

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

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

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

FOR LINE NUMBER: PAGE 60 OF 323  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 324 CHESTNUT HILL COURT  
APT 16

City THOUSAND OAKS State CA Zip Code 91360-3893

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
09 / 09 / 2014  
**Transaction ID : SA11.937432**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

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

Mailing Address 6802 FOX MEADOW LANE SE

City ADA State MI Zip Code 49301-7559

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
09 / 09 / 2014  
**Transaction ID : SA11.938126**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

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

Mailing Address 8644 BLACKWOLF DRIVE

City MADISON State WI Zip Code 53717-2139

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
09 / 09 / 2014  
**Transaction ID : SA11.937168**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

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

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

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

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

FOR LINE NUMBER: PAGE 61 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 3702 TIMBER TRAILS COURT

City State Zip Code  
EAU CLAIRE WI 54701-9001

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

Name of Employer Occupation  
EVERGREEN SURGICAL SURGEON

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2014  
**Transaction ID : SA11.937705**

Amount of Each Receipt this Period  
400.00

CONTRIBUTION

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

Mailing Address 6402 SHARPSBURG DRIVE

City State Zip Code  
MADISON WI 53718-3160

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
825.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : SA11.937482**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

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

Mailing Address P.O. BOX 376

City State Zip Code  
LOWELL WI 53557-0376

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:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : SA11.938524**

Amount of Each Receipt this Period  
300.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 800.00

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

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

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

FOR LINE NUMBER: PAGE 62 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 1645 LAKES PKWY STE E

City State Zip Code  
LAWRENCEVILLE GA 30043-5898

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : SA11.938471**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

Mailing Address 17750 MARSEILLE DR

City State Zip Code  
BROOKFIELD WI 53045-5020

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : SA11.937828**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

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

Mailing Address 3716 MAPLEWOOD AVENUE

City State Zip Code  
DALLAS TX 75205-2827

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : SA11.938291**

Amount of Each Receipt this Period  
15000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15350.00

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

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

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

FOR LINE NUMBER: PAGE 63 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. JOHN J COSTELLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 218 LOUIS LN  
 City ENOLA State PA Zip Code 17025-2141  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : SA11.938286**  
 Amount of Each Receipt this Period  
 300.00  
 CONTRIBUTION

**B. BETTY DANIEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3205 S ASH ST  
 City PERRYTON State TX Zip Code 79070-5307  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : SA11.938329**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**C. VIRGINIA L. DEKKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24 IROQUOIS DRIVE  
 City HENDERSONVILLE State NC Zip Code 28791-1834  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : SA11.937257**  
 Amount of Each Receipt this Period  
 150.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 64 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **245 GARFIELD AVENUE**

City **EVANSVILLE** State **WI** Zip Code **53536-1009**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**09 / 10 / 2014**  
**Transaction ID : SA11.937468**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

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

Mailing Address **2712 MANORWOOD TRL**

City **FORT WORTH** State **TX** Zip Code **76109-9589**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
**09 / 10 / 2014**  
**Transaction ID : SA11.938333**

Amount of Each Receipt this Period  
**200.00**

CONTRIBUTION

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

Mailing Address **2211 175TH AVE NW**

City **BALDWIN** State **ND** Zip Code **58521-9732**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**09 / 10 / 2014**  
**Transaction ID : SA11.938666**

Amount of Each Receipt this Period  
**300.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **550.00**

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



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

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

FOR LINE NUMBER: PAGE 65 OF 323  
(check only one)  
 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. PAUL GOODMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 99 S SERVICE RD #402  
 City NEW HYDE PARK State NY Zip Code 11040-1071  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 10 / 2014  
**Transaction ID : SA11.938665**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**B. DONALD HARRIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1812 NAVY ST  
 City SANTA MONICA State CA Zip Code 90405-5944  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 10 / 2014  
**Transaction ID : SA11.938458**  
 Amount of Each Receipt this Period 200.00  
 CONTRIBUTION

**C. ARTHUR R. HILSINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8 JACKSON POND RD  
 City DEDHAM State MA Zip Code 02026-5524  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 10 / 2014  
**Transaction ID : SA11.937979**  
 Amount of Each Receipt this Period 500.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 800.00  
**TOTAL** This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 66 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **E14351 STATE ROAD 33**

City **BARABOO** State **WI** Zip Code **53913-9627**

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

Name of Employer **SELF EMPLOYED** Occupation **FARMER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 10 / 2014**

**Transaction ID : SA11.937160**

Amount of Each Receipt this Period  
**150.00**

CONTRIBUTION

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

Mailing Address **31871 W TREASURE ISLAND DRIVE**

City **HARTLAND** State **WI** Zip Code **53029-8728**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 10 / 2014**

**Transaction ID : SA11.937833**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

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

Mailing Address **7940 AMALFI WAY**

City **FAIR OAKS** State **CA** Zip Code **95628-5903**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 10 / 2014**

**Transaction ID : SA11.938445**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **450.00**

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

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

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

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **7323 CARTWRIGHT AVE**

City **SUN VALLEY** State **CA** Zip Code **91352-5107**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt  
**09 / 10 / 2014**  
**Transaction ID : SA11.938468**

Amount of Each Receipt this Period  
**175.00**

CONTRIBUTION

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

Mailing Address **11320 BOTHWELL WAY**

City **HOUSTON** State **TX** Zip Code **77024-5302**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt  
**09 / 10 / 2014**  
**Transaction ID : SA11.938334**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

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

Mailing Address **2717 SEVILLE BLVD APT 12205**

City **CLEARWATER** State **FL** Zip Code **33764-1188**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt  
**09 / 10 / 2014**  
**Transaction ID : SA11.938764**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► **525.00**

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

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

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

FOR LINE NUMBER: PAGE 68 OF 323  
(check only one)  
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 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **N106W6988 DAYTON STREET**

City State Zip Code  
**CEDARBURG WI 53012-1272**

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

Name of Employer Occupation  
**INFORMATION REQUESTED PER BEST EFFC UNKNOWN**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**09 / 10 / 2014**

**Transaction ID : SA11.938317**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

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

Mailing Address **138 W SUNFLOWER DR**

City State Zip Code  
**PAYSON AZ 85541-6152**

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

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**575.00**

Date of Receipt  
**09 / 10 / 2014**

**Transaction ID : SA11.937978**

Amount of Each Receipt this Period  
**25.00**

CONTRIBUTION

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

Mailing Address **1800 KINGS ROAD**

City State Zip Code  
**NEWPORT BEACH CA 92663-5003**

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

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**210.00**

Date of Receipt  
**09 / 10 / 2014**

**Transaction ID : SA11.938651**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► **325.00**

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

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

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

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 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 2323 BRENT DRIVE

City State Zip Code  
DODGE CITY KS 67801-8447

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

Name of Employer Occupation  
SEPC ELECTRICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : SA11.938236**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

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

Mailing Address 8306 ROAD 3.2 NE

City State Zip Code  
MOSES LAKE WA 98837-7801

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : SA11.938463**

Amount of Each Receipt this Period  
 200.00

CONTRIBUTION

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

Mailing Address 927 CORNELL COURT

City State Zip Code  
MADISON WI 53705-2241

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

Name of Employer Occupation  
SELF EMPLOYED REAL ESTATE MANAGEMENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : SA11.937472**

Amount of Each Receipt this Period  
 50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 260.00

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

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

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

FOR LINE NUMBER: PAGE 70 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address P.O. BOX 78260

City State Zip Code  
NEWPORT KY 41076-

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : SA11.938858**

Amount of Each Receipt this Period  
700.00

CONTRIBUTION

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

Mailing Address T5942 N TROY ST

City State Zip Code  
WAUSAU WI 54403-2065

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : SA11.937832**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

Mailing Address 5093 N WOODROW AVE

City State Zip Code  
FRESNO CA 93720-

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : SA11.938681**

Amount of Each Receipt this Period  
125.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► 1325.00

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

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

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

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 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 108 MALIN STREET

City State Zip Code  
GENOA WI 54632-8875

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11.936952**

Amount of Each Receipt this Period  
25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. FRANK J. BAUS**

Mailing Address 5518 FORK RD

City State Zip Code  
HARTFORD WI 53027-9441

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

Name of Employer Occupation  
FRANKEN MACHINING, LLC SELF EMPLOYED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11.938002**

Amount of Each Receipt this Period  
25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. DR. KATHY P. BELGEA MD**

Mailing Address C1386 FUR FOOD ROADQ

City State Zip Code  
STRATFORD WI 54484-

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11.937324**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 150.00

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

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

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

FOR LINE NUMBER: PAGE 72 OF 323  
(check only one)  
 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **N1693 BOULDER COURT**

City **LA CROSSE** State **WI** Zip Code **54601-2592**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
**09 / 11 / 2014**  
**Transaction ID : SA11.938531**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

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

Mailing Address **N1693 BOULDER COURT**

City **LA CROSSE** State **WI** Zip Code **54601-2592**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
**09 / 11 / 2014**  
**Transaction ID : SA11.938635**

Amount of Each Receipt this Period  
**125.00**

CONTRIBUTION

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

Mailing Address **5929 W WASHINGTON BOULEVARD APT 2**

City **MILWAUKEE** State **WI** Zip Code **53208-1676**

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

Name of Employer **TIM BITTERS PROPERTY MAINTENANCE CO** Occupation **OWNER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **465.00**

Date of Receipt  
**09 / 11 / 2014**  
**Transaction ID : SA11.936964**

Amount of Each Receipt this Period  
**75.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **250.00**

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



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

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

FOR LINE NUMBER: PAGE 73 OF 323  
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 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address P.O. BOX 756

City State Zip Code  
OSCEOLA WI 54020-0756

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11.937989**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

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

Mailing Address 1221 TENNY AVENUE

City State Zip Code  
WAUKESHA WI 53186-6650

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11.937612**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

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

Mailing Address 3607 S 14TH ST

City State Zip Code  
ALEXANDRIA VA 22302-1001

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11.938740**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00

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

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

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

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 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. GEORGE E. CORT**  
 Mailing Address 16960 WILDWOOD DRIVE  
 City State Zip Code  
 MONTROSE CO 81403-9504  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11.937124**  
 Amount of Each Receipt this Period  
 150.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JOANNE L. FAIRCHILD**  
 Mailing Address 1521 N 58TH STREET  
 City State Zip Code  
 MILWAUKEE WI 53208-2137  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11.937325**  
 Amount of Each Receipt this Period  
 40.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. RAYMOND FINK**  
 Mailing Address P.O. BOX 134  
 City State Zip Code  
 WILLIAMSTON MI 48895-0134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11.937716**  
 Amount of Each Receipt this Period  
 150.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 340.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 75 OF 323  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 32046 W TREASURE ISLAND DRIVE

City	State	Zip Code
HARTLAND	WI	53029-9309

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

Name of Employer	Occupation
Metal Craft of Mayville	Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11.937035**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

Mailing Address 6756 N 72ND AVE

City	State	Zip Code
WAUSAU	WI	54401-8804

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11.938746**

Amount of Each Receipt this Period  
 50.00

CONTRIBUTION

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

Mailing Address 1196 BLAKES WAY

City	State	Zip Code
MENASHA	WI	54952-1967

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11.937486**

Amount of Each Receipt this Period  
 35.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1085.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 76 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **23512 31ST STREET**

City **SALEM** State **WI** Zip Code **53168-9502**

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

Name of Employer **LUDWIG CONCRETE, INC** Occupation **CONCRETE WORK**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 11 / 2014**

**Transaction ID : SA11.937116**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

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

Mailing Address **S27 W29517 JARMON ROAD**

City **WAUKESHA** State **WI** Zip Code **53188-9224**

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

Name of Employer **SOURCE ONE HEALTHCARE** Occupation **MEDICAL IMAGING**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 11 / 2014**

**Transaction ID : SA11.937506**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

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

Mailing Address **9732 N COLUMBIA CREEK LN**

City **MEQUON** State **WI** Zip Code **53092-5655**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 11 / 2014**

**Transaction ID : SA11.937796**

Amount of Each Receipt this Period  
**25.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **175.00**

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

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

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

FOR LINE NUMBER: PAGE 77 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 1012 HAWTHORN CIRCLE

City State Zip Code  
 WAUKESHA WI 53188-2923

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

Name of Employer Occupation  
 INFORMATION REQUESTED PER BEST EFFORT UNKNOWN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 280.00

Date of Receipt  
 09 / 11 / 2014  
**Transaction ID : SA11.937143**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

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

Mailing Address 4103 S BURRELL ST.

City State Zip Code  
 MILWAUKEE WI 53207-4405

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

Name of Employer Occupation  
 W.B. BOTTLE SUPPLY CO. FACTORY WORKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 385.00

Date of Receipt  
 09 / 11 / 2014  
**Transaction ID : SA11.937861**

Amount of Each Receipt this Period  
 50.00

CONTRIBUTION

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

Mailing Address 16 RIVERS CT

City State Zip Code  
 OAK RIDGE TN 37830-7275

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

Name of Employer Occupation  
 RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 09 / 11 / 2014  
**Transaction ID : SA11.938751**

Amount of Each Receipt this Period  
 20.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 170.00

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

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

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

FOR LINE NUMBER: PAGE 78 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 700 QUINLEN DR APT 338

City State Zip Code  
PEWAUKEE WI 53072-1832

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
395.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11.937714**

Amount of Each Receipt this Period  
45.00

CONTRIBUTION

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

Mailing Address 455 E MORGAN AVENUE

City State Zip Code  
MILWAUKEE WI 53207-3309

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1140.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11.936992**

Amount of Each Receipt this Period  
150.00

CONTRIBUTION

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

Mailing Address 715 BENT STREET

City State Zip Code  
ELGIN IL 60120-7954

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11.938530**

Amount of Each Receipt this Period  
55.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.00

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

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

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

FOR LINE NUMBER: PAGE 79 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. CORREEN STGEORGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6555 NORTH GREEN BAY AVE UNIT 110  
 City State Zip Code  
 GLENDALE WI 53209-3469  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11.938083**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**B. SANDRA STRATZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2750 KILLARNEY COURT  
 City State Zip Code  
 OSHKOSH WI 54904-7306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RIVERSIDE ENDODONTICS OFFICE MANAGER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11.936974**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**C. PAMELA STRICKLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 7517  
 City State Zip Code  
 CHESTNUT MOUNTAIN GA 30502-0517  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11.938730**  
 Amount of Each Receipt this Period  
 300.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 900.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 80 OF 323  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. MR. KENNETH SWEET**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4045 S 54TH STREET  
City MILWAUKEE State WI Zip Code 53220-2613  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation N/A  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 480.00

Date of Receipt 09 / 11 / 2014  
**Transaction ID : SA11.936959**  
Amount of Each Receipt this Period 60.00  
CONTRIBUTION

**B. MR. BERNARD VAN DINTER**  
Full Name (Last, First, Middle Initial)  
Mailing Address 8081 FIELDING LANE  
City GREENDALE State WI Zip Code 53129-2115  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 11 / 2014  
**Transaction ID : SA11.937523**  
Amount of Each Receipt this Period 200.00  
CONTRIBUTION

**C. MARY ANN WATSON**  
Full Name (Last, First, Middle Initial)  
Mailing Address 172 PLAINVIEW ST  
City MEMPHIS State TN Zip Code 38111-1936  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 540.00

Date of Receipt 09 / 11 / 2014  
**Transaction ID : SA11.938753**  
Amount of Each Receipt this Period 300.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 560.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

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

FOR LINE NUMBER: PAGE 81 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. INTL UNION OF OP ENG LOCAL 139**  
 Mailing Address **PO BOX 130**  
 City **PEWAUKEE** State **WI** Zip Code **53072-0130**  
 FEC ID number of contributing federal political committee. **C C00423731**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA11.946750**  
 Amount of Each Receipt this Period  
 5000.00  
**CONTRIBUTION**

Full Name (Last, First, Middle Initial)  
**B. JAMES R. BECKER**  
 Mailing Address **5830 N SUNNY POINT ROAD**  
 City **MILWAUKEE** State **WI** Zip Code **53209-4428**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
**SELF EMPLOYED PRIVATE INVESTOR**  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11.939265**  
 Amount of Each Receipt this Period  
 150.00  
**CONTRIBUTION**

Full Name (Last, First, Middle Initial)  
**C. JACK M. BLANK**  
 Mailing Address **8220 HARWOOD AVENUE, APT 604**  
 City **MILWAUKEE** State **WI** Zip Code **53213-2575**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
**CREATIVE DESIGN NETWORK DESIGNER**  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11.939909**  
 Amount of Each Receipt this Period  
 150.00  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5300.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 82 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 13855 ELIZABETH COURT

City State Zip Code  
NEW BERLIN WI 53151-8021

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

Name of Employer Occupation  
BOETTCHER Associates VP

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11.939280**

Amount of Each Receipt this Period  
150.00

CONTRIBUTION

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

Mailing Address P.O. BOX 1147

City State Zip Code  
TALLAHASSEE FL 32302-1147

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
510.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11.939735**

Amount of Each Receipt this Period  
260.00

CONTRIBUTION

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

Mailing Address 8721 E BEBE ROAD

City State Zip Code  
SOLON SPRINGS WI 54873-8122

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:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11.939682**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 510.00

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

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

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

FOR LINE NUMBER: PAGE 83 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 108 N BARSTOW STREET

City State Zip Code  
WAUKESHA WI 53186-4928

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2050.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11.940441**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

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

Mailing Address 875 18TH AVE S

City State Zip Code  
NAPLES FL 34102-7542

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
485.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11.938269**

Amount of Each Receipt this Period  
35.00

CONTRIBUTION

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

Mailing Address 612 REGENCY CROSSING

City State Zip Code  
SOUTHLAKE TX 76092-9502

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11.938087**

Amount of Each Receipt this Period  
600.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1635.00

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

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

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

FOR LINE NUMBER: PAGE 84 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. DONNA DENNIS**  
 Mailing Address 54894 300TH ST.  
 City State Zip Code  
 AUSTIN MN 55912-6596  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11.940053**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. WILLIAM DERRICK**  
 Mailing Address 520 PINE RIDGE CT  
 City State Zip Code  
 NEW RICHMOND WI 54017-2243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 William Derrick Construction Owner  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11.939744**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. VIRGINIA FROELKER**  
 Mailing Address 4496 BIG CREEK ROAD  
 City State Zip Code  
 GERALD MO 63037-2616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 435.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11.941026**  
 Amount of Each Receipt this Period  
 160.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 310.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 85 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. MARK GALLISON**  
 Mailing Address 1212 SYCAMORE STREET  
 City State Zip Code  
 TURLOCK CA 95380-4147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11.939079**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. DOROTHY HALL**  
 Mailing Address 1100 FOUNTAIN HILLS DRIVE APT 234  
 City State Zip Code  
 MOUNT PLEASANT WI 53406-3786  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11.939677**  
 Amount of Each Receipt this Period  
 30.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MAUREEN HALL**  
 Mailing Address 125 W WHITE OAK WAY  
 City State Zip Code  
 THIENSVILLE WI 53092-6244  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11.939790**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 180.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 86 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. MR. LEWIS P. HANSON**

Mailing Address **W51N602 CEDAR RESERVE CIRCLE**

City State Zip Code  
**CEDARBURG WI 53012-2134**

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

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**950.00**

Date of Receipt  
**09 / 12 / 2014**

**Transaction ID : SA11.939234**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

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

Mailing Address **3635 NORTH TUCKER PLACE, APT 103**

City State Zip Code  
**MILWAUKEE WI 53222-2701**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**245.00**

Date of Receipt  
**09 / 12 / 2014**

**Transaction ID : SA11.939560**

Amount of Each Receipt this Period  
**30.00**

CONTRIBUTION

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

Mailing Address **12480 GREEN MEADOW PLACE**

City State Zip Code  
**ELM GROVE WI 53122-1931**

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

Name of Employer Occupation  
**MEDICAL COLLEGE OF WISCONSIN PHYSICIAN**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**400.00**

Date of Receipt  
**09 / 12 / 2014**

**Transaction ID : SA11.939966**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **380.00**

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

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

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

FOR LINE NUMBER: PAGE 87 OF 323  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. MR. ROBERT L. HOLMES**

Mailing Address 12157 N RIVER GLENN LANE

City MEQUON	State WI	Zip Code 53092-2912
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  
09 / 12 / 2014  
**Transaction ID : SA11.939612**

Amount of Each Receipt this Period  
125.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. FRANK KEARNY III**

Mailing Address 103 LIMEKILN DRIVE

City NEENAH	State WI	Zip Code 54956-4213
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
09 / 12 / 2014  
**Transaction ID : SA11.939507**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. GREGORY A. KRIEGER**

Mailing Address 15155 CARPENTER ROAD

City BROOKFIELD	State WI	Zip Code 53005-4145
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
09 / 12 / 2014  
**Transaction ID : SA11.939284**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	875.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 88 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 24284 NOBE ST

City State Zip Code  
CORONA CA 92883-9327

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11.939086**

Amount of Each Receipt this Period  
40.00

CONTRIBUTION

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

Mailing Address 13731 HICKMAN ROAD UNIT 3407

City State Zip Code  
URBANDALE IA 50323-2199

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11.939836**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

Mailing Address 1669 YANKEE DOODLE ROAD

City State Zip Code  
SAINT PAUL MN 55121-1754

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11.940131**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 390.00

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



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

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

FOR LINE NUMBER: PAGE 89 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **2468 218TH AVE**

City **SAINT CROIX FALLS** State **WI** Zip Code **54024-7813**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
**09 / 12 / 2014**  
**Transaction ID : SA11.938282**

Amount of Each Receipt this Period  
**400.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. FLOYD C. MILLER**

Mailing Address **W4582 EDWARD STREET**

City **APPLETON** State **WI** Zip Code **54913-8347**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**09 / 12 / 2014**  
**Transaction ID : SA11.939243**

Amount of Each Receipt this Period  
**150.00**

CONTRIBUTION

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

Mailing Address **N87W15735 BELLEVIEW BOULEVARD**

City **MENOMONEE FALLS** State **WI** Zip Code **53051-2905**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**09 / 12 / 2014**  
**Transaction ID : SA11.938154**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► **800.00**

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

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

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

FOR LINE NUMBER: PAGE 90 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 5400 GOLDENROD ROAD

City State Zip Code  
RENO NV 89511-9051

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11.939724**

Amount of Each Receipt this Period  
110.00

CONTRIBUTION

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

Mailing Address 1971 VIA DEL PICAMADEROS

City State Zip Code  
GREEN VALLEY AZ 85622-5413

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11.939290**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

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

Mailing Address W4337 COUNTY ROAD S TRAILER 31

City State Zip Code  
HORICON WI 53032-9793

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
405.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11.939274**

Amount of Each Receipt this Period  
90.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00

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

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

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

FOR LINE NUMBER: PAGE 91 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. ROSANNE P. SEDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address W130N6239 RIVER DRIVE  
 City State Zip Code  
 MENOMONEE FALLS WI 53051-6041  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11.939281**  
 Amount of Each Receipt this Period  
 300.00  
 CONTRIBUTION

**B. GARY TEEGARDIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2323 BRENT DRIVE  
 City State Zip Code  
 DODGE CITY KS 67801-8447  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SEPC ELECTRICIAN  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11.937860**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**C. DANIEL ULIK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9969 S 60TH STREET  
 City State Zip Code  
 FRANKLIN WI 53132-8824  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 STU'S FLOORING MANAGER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : SA11.939975**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 323
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address S5385 HANSON LANE

City VIROQUA State WI Zip Code 54665-8061

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

Name of Employer SELF EMPLOYED Occupation MENTAL HEALTH

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
09 / 12 / 2014  
**Transaction ID : SA11.940089**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

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

Mailing Address 1900 ABBY ROAD

City CUMBERLAND State WI Zip Code 54829-8705

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
09 / 12 / 2014  
**Transaction ID : SA11.939894**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C. MR. GLEN M. WIESE**  
Full Name (Last, First, Middle Initial)

Mailing Address 1412 RIVERSIDE DRIVE

City RIVER FALLS State WI Zip Code 54022-3248

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 233.00

Date of Receipt  
09 / 12 / 2014  
**Transaction ID : SA11.939372**

Amount of Each Receipt this Period  
35.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 385.00

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

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

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

FOR LINE NUMBER: PAGE 93 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. BOURDETTE WOOD JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2643 W LAKE VISTA COURT  
 City MEQUON State WI Zip Code 53092-2422  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 09 / 12 / 2014  
**Transaction ID : SA11.939111**  
 Amount of Each Receipt this Period 110.00  
 CONTRIBUTION

**B. MARION S. YERKES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3679 BLACKFOOT CT SW  
 City GRANDVILLE State MI Zip Code 49418-1721  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 12 / 2014  
**Transaction ID : SA11.939089**  
 Amount of Each Receipt this Period 75.00  
 CONTRIBUTION

**C. TED AMSBAUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1302 24TH ST W #329  
 City BILLINGS State MT Zip Code 59102-3861  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 15 / 2014  
**Transaction ID : SA11.940731**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 285.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 94 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 502 W WALTERS ST

City State Zip Code  
PORT WASHINGTON WI 53074-1430

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

Name of Employer Occupation  
SELF SELF

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : SA11.940426**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

Mailing Address 1024 BRIARWOOD LN

City State Zip Code  
FOND DU LAC WI 54935-6366

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

Name of Employer Occupation  
ARIMON TECHNOLOGIES INC MANAGER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : SA11.940321**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

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

Mailing Address 29710 NIAGARA COURT

City State Zip Code  
ENGLEWOOD FL 34223-3971

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : SA11.940243**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► 1300.00

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

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

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

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(check only one)  
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 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 12494 N ROYAL LANE

City State Zip Code  
THIENSVILLE WI 53092-8554

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
925.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : SA11.939687**

Amount of Each Receipt this Period  
350.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. WALTER H. CLAIBORNE III**

Mailing Address 2509 PINE STREET

City State Zip Code  
NEW ORLEANS LA 70125-4048

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

Name of Employer Occupation  
SELF EMPLOYED REAL ESTATE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : SA11.940127**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

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

Mailing Address 4414 WOODLAND AVEUE

City State Zip Code  
DULUTH MN 55803-

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:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : SA11.939367**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 650.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 14000 EAST LINVALE PLACE; APT 305

City State Zip Code  
AURORA CO 80014-3718

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : SA11.939750**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

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

Mailing Address 57 WAITES LANDING ROAD

City State Zip Code  
FALMOUTH ME 04105-1932

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : SA11.940327**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

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

Mailing Address P.O. BOX 765

City State Zip Code  
NEENAH WI 54957-0765

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : SA11.940116**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

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

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



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

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 18145 COOPERS LN

City State Zip Code  
BROOKFIELD WI 53045-6650

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

Name of Employer Occupation  
XACT WIRE EDM CORP MANAGER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : SA11.941056**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

Mailing Address 693 MONTCALM PLACE

City State Zip Code  
SAINT PAUL MN 55116-1745

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1050.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : SA11.940004**

Amount of Each Receipt this Period  
400.00

CONTRIBUTION

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

Mailing Address W140 N7975 LILLY ROAD

City State Zip Code  
MENOMONEE FALLS WI 53051-4419

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : SA11.939915**

Amount of Each Receipt this Period  
150.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 800.00

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

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

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

FOR LINE NUMBER: PAGE 98 OF 323  
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 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **25707 BRIDLE FALLS**

City **MAGNOLIA** State **TX** Zip Code **77355-5890**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 15 / 2014**

**Transaction ID : SA11.940724**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

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

Mailing Address **17148 145TH STREET**

City **TWIN BROOKS** State **SD** Zip Code **57269-**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 15 / 2014**

**Transaction ID : SA11.940498**

Amount of Each Receipt this Period  
**60.00**

CONTRIBUTION

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

Mailing Address **1140 N EAGLE STREET APT 411**

City **OSHKOSH** State **WI** Zip Code **54902-2668**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 15 / 2014**

**Transaction ID : SA11.939262**

Amount of Each Receipt this Period  
**150.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► **710.00**

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

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **N2531 RUSTIC DRIVE**

City **CLINTONVILLE**      State **WI**      Zip Code **54929-8587**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS**      Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
**09 / 15 / 2014**  
**Transaction ID : SA11.939671**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

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

Mailing Address **16851 HARLEM AVENUE APT 236**

City **TINLEY PARK**      State **IL**      Zip Code **60477-2736**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **215.00**

Date of Receipt  
**09 / 15 / 2014**  
**Transaction ID : SA11.939710**

Amount of Each Receipt this Period  
**20.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MRS. VIRGINIA M. SCHULTZ**

Mailing Address **13820 KEEFE AVENUE**

City **BROOKFIELD**      State **WI**      Zip Code **53005-3300**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**09 / 15 / 2014**  
**Transaction ID : SA11.939540**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► **170.00**

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

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. CLAUDIA L. SIESENNOP**  
 Mailing Address **W5233 STERLINGWORTH COURT**  
 City State Zip Code  
**ELKHORN WI 53121-2782**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
**HOMEMAKER HOMEMAKER**  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**09 / 15 / 2014**  
**Transaction ID : SA11.940266**  
 Amount of Each Receipt this Period  
**50.00**  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. WILLIAM STONE**  
 Mailing Address **1072 288TH AVE**  
 City State Zip Code  
**BURLINGTON WI 53105-9304**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
**RETIRED RETIRED**  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt  
**09 / 15 / 2014**  
**Transaction ID : SA11.940671**  
 Amount of Each Receipt this Period  
**200.00**  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MRS. MAE E. VANGSNESS**  
 Mailing Address **7300 W DEAN ROAD # 3060**  
 City State Zip Code  
**MILWAUKEE WI 53223-2653**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
**RETIRED RETIRED**  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**400.00**

Date of Receipt  
**09 / 15 / 2014**  
**Transaction ID : SA11.939695**  
 Amount of Each Receipt this Period  
**100.00**  
 CONTRIBUTION

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

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

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

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 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. RICHARD T. BAILEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1331 EAST HECLA DRIVE, UNIT B2  
 City LOUISVILLE State CO Zip Code 80027-2348  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.939981**  
 Amount of Each Receipt this Period  
 150.00  
 CONTRIBUTION

**B. JOHN H. BARRETTE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 930 25TH PLACE  
 City WISCONSIN RAPIDS State WI Zip Code 54494-3199  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.939907**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

**C. NORBERT J. BARRETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2409 10TH AVENUE 225  
 City SOUTH MILWAUKEE State WI Zip Code 53172-2577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.939815**  
 Amount of Each Receipt this Period  
 70.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 270.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 102 OF 323
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 1057 BEACH AVENUE

City CAPE MAY State NJ Zip Code 08204-1613

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
09 / 16 / 2014  
Transaction ID : SA11.939464

Amount of Each Receipt this Period  
125.00

CONTRIBUTION

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

Mailing Address 1694 E HAYDEN AVE

City HAYDEN LAKE State ID Zip Code 83835-9524

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
09 / 16 / 2014  
Transaction ID : SA11.941250

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

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

Mailing Address 6318 WOODMAN DRIVE

City OROVILLE State CA Zip Code 95966-3844

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
385.00

Date of Receipt  
09 / 16 / 2014  
Transaction ID : SA11.939163

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 275.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. GEORGE R. BROWN**  
 Mailing Address 26291 MIRA WAY  
 City State Zip Code  
 BONITA SPRINGS FL 34134-1638  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.941343**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. KURT BROWN**  
 Mailing Address P.O. BOX 233  
 City State Zip Code  
 PARK FALLS WI 54552-0233  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self-Employed Physician  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.939592**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. PAMELA BURCHARD**  
 Mailing Address 15 FALLING LEAF DRIVE  
 City State Zip Code  
 TRAVELERS REST SC 29690-7201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED PER BEST EFFC FAMILY PHYSICIAN  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.940107**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 950.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

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 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **815A HILLTOP AVE. EXTENSION**

City **ABINGDON**      State **MD**      Zip Code **21009-1306**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**606.00**

Date of Receipt  
**09 / 16 / 2014**

**Transaction ID : SA11.941327**

Amount of Each Receipt this Period  
**45.00**

CONTRIBUTION

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

Mailing Address **3089 BUCK ROAD P.O. BOX 491**

City **BRYN ATHYN**      State **PA**      Zip Code **19009-0491**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**350.00**

Date of Receipt  
**09 / 16 / 2014**

**Transaction ID : SA11.941411**

Amount of Each Receipt this Period  
**200.00**

CONTRIBUTION

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

Mailing Address **2025 MEANDER**

City **PRESCOTT**      State **AZ**      Zip Code **86305-2163**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**285.00**

Date of Receipt  
**09 / 16 / 2014**

**Transaction ID : SA11.939158**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► **345.00**

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



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

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

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 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. MR. MELVIN L. DAVIDSON**  
Mailing Address 4908 ISLE VIEW DRIVE  
City State Zip Code  
RHINELANDER WI 54501-2106  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
RETIRED RETIRED  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
09 / 16 / 2014  
**Transaction ID : SA11.939535**  
Amount of Each Receipt this Period  
100.00  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. DOUGLAS DICKSON**  
Mailing Address 223 W ELIZABETH STREET  
City State Zip Code  
YORKVILLE IL 60560-1746  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
RETIRED RETIRED  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
09 / 16 / 2014  
**Transaction ID : SA11.939356**  
Amount of Each Receipt this Period  
100.00  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. JEAN DIEFENTHALER**  
Mailing Address W5606 COUNTY ROAD EH  
City State Zip Code  
ELKHART LAKE WI 53020-1667  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
RETIRED RETIRED  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
280.00

Date of Receipt  
09 / 16 / 2014  
**Transaction ID : SA11.940471**  
Amount of Each Receipt this Period  
25.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 225.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **N2405 HILLSIDE ROAD**

City **ANTIGO** State **WI** Zip Code **54409-8865**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt  
**09 / 16 / 2014**  
**Transaction ID : SA11.941281**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

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

Mailing Address **20 FRAMINGHAM LANE**

City **PITTSFORD** State **NY** Zip Code **14534-1048**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**09 / 16 / 2014**  
**Transaction ID : SA11.940119**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

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

Mailing Address **366 SHORE ROAD**

City **STATEN ISLAND** State **NY** Zip Code **10307-1551**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt  
**09 / 16 / 2014**  
**Transaction ID : SA11.939727**

Amount of Each Receipt this Period  
**30.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **180.00**

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

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 157 RITCHIE DRIVE

City State Zip Code  
YONKERS NY 10705-4516

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.940247**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

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

Mailing Address 12114 E BRADFORD TOWN HALL ROAD

City State Zip Code  
DARIEN WI 53114-1115

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

Name of Employer Occupation  
SELF EMPLOYED FARMER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.941160**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

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

Mailing Address 1381 GOLDEN RAIN RD. APT 21G

City State Zip Code  
SEAL BEACH CA 90740-4830

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.941396**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

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

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

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

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **861 HAWTHORNE CIR**

City **LOMBARD**      State **IL**      Zip Code **60148-3636**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt  
**09 / 16 / 2014**  
**Transaction ID : SA11.941390**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

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

Mailing Address **1924 W ASHBURY LANE**

City **INVERNESS**      State **IL**      Zip Code **60067-4796**

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

Name of Employer **N/A**      Occupation **HOMEMAKER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**400.00**

Date of Receipt  
**09 / 16 / 2014**  
**Transaction ID : SA11.940245**

Amount of Each Receipt this Period  
**150.00**

CONTRIBUTION

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

Mailing Address **117 N 74TH ST**

City **MILWAUKEE**      State **WI**      Zip Code **53213-3626**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**400.00**

Date of Receipt  
**09 / 16 / 2014**  
**Transaction ID : SA11.941292**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

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

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

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 4741 KINGLET ST

City State Zip Code  
HOUSTON TX 77035-4923

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.940883**

Amount of Each Receipt this Period  
150.00

CONTRIBUTION

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

Mailing Address 7502 WEST TUCKAWAY PINES CIR.

City State Zip Code  
FRANKLIN WI 53132-8178

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
299.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.941286**

Amount of Each Receipt this Period  
100.50

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. MARVIN R. KOVACH**

Mailing Address 3417 HICKORY RIDGE DRIVE

City State Zip Code  
DE PERE WI 54115-8615

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

Name of Employer Occupation  
KRAFT FOODS RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.939245**

Amount of Each Receipt this Period  
80.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 330.50

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

**SCHEDULE A (FEC Form 3X)  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **571 280TH STREET**

City **OSCEOLA** State **WI** Zip Code **54020-4018**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt  
**09 / 16 / 2014**  
**Transaction ID : SA11.940967**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

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

Mailing Address **1708 JONIPER WAY**

City **HARTLAND** State **WI** Zip Code **53029-8669**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**09 / 16 / 2014**  
**Transaction ID : SA11.941296**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

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

Mailing Address **8400 CALLIE AVENUE UNIT 610**

City **MORTON GROVE** State **IL** Zip Code **60053-5009**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**09 / 16 / 2014**  
**Transaction ID : SA11.940240**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

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

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

**SCHEDULE A (FEC Form 3X)  
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	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 1930 W 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:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1350.00

Date of Receipt: 09 / 16 / 2014  
**Transaction ID : SA11.940316**  
 Amount of Each Receipt this Period: 600.00  
**CONTRIBUTION**

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

Mailing Address 266 HOLLYWOOD AVE

City MONROEVILLE	State NJ	Zip Code 08343-9041
---------------------	-------------	------------------------

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

Name of Employer INS SERVICES INC/	Occupation CEO
---------------------------------------	-------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 09 / 16 / 2014  
**Transaction ID : SA11.941328**  
 Amount of Each Receipt this Period: 100.00  
**CONTRIBUTION**

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

Mailing Address 724 EAST GRINNEL DR

City BURBANK	State CA	Zip Code 91501-1720
-----------------	-------------	------------------------

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

Name of Employer DOJ OF THE STATE OF CALIFORNIA	Occupation LAWYER
--	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1105.00

Date of Receipt: 09 / 16 / 2014  
**Transaction ID : SA11.941238**  
 Amount of Each Receipt this Period: 100.00  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address **111 BORDER LEE FARM**

City **CAMERON** State **NC** Zip Code **28326-7043**

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

Name of Employer **MCLEOD AUTO CRUSHING** Occupation **SELF EMPLOYED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **510.00**

Date of Receipt  
**09 / 16 / 2014**  
**Transaction ID : SA11.939704**

Amount of Each Receipt this Period  
**165.00**

CONTRIBUTION

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

Mailing Address **6520 HARWICK CIR**

City **HIXSON** State **TN** Zip Code **37343-7515**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
**09 / 16 / 2014**  
**Transaction ID : SA11.940852**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

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

Mailing Address **N3969 COUNTY A**

City **COLUMBUS** State **WI** Zip Code **53925-**

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

Name of Employer **SELF EMPLOYED** Occupation **FARMER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **690.00**

Date of Receipt  
**09 / 16 / 2014**  
**Transaction ID : SA11.939905**

Amount of Each Receipt this Period  
**230.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► **895.00**

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



**SCHEDULE A (FEC Form 3X)  
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	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. MR. FREDERICK E. NAGEL**  
Full Name (Last, First, Middle Initial)

Mailing Address 1312 WISCONSIN STREET

City HUDSON State WI Zip Code 54016-1889

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014

**Transaction ID : SA11.939539**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

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

Mailing Address 614 WILLIAMS STREET

City VIROQUA State WI Zip Code 54665-1051

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014

**Transaction ID : SA11.939969**

Amount of Each Receipt this Period  
 35.00

CONTRIBUTION

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

Mailing Address N12 W2912 CREEKSIDE COURT

City WAUKESHA State WI Zip Code 53188-

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014

**Transaction ID : SA11.939139**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 145.00

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

**SCHEDULE A (FEC Form 3X)  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 5538 JESSAMINE LN

City State Zip Code  
ORLANDO FL 32839-2060

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.939324**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

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

Mailing Address 6416 RED FOX COURT

City State Zip Code  
MINNEAPOLIS MN 55436-1922

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.941194**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

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

Mailing Address P.O. BOX 520

City State Zip Code  
RIPON WI 54971-0520

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

Name of Employer Occupation  
AFK CORP FOUNDRY EXECUTIVE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.941314**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1400.00

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

**SCHEDULE A (FEC Form 3X)  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

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

Mailing Address 138 W SUNFLOWER DR

City State Zip Code  
PAYSON AZ 85541-6152

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
575.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.941122**

Amount of Each Receipt this Period  
400.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. ROBERT J. RADTKE**

Mailing Address S2923 MAPLE LANE

City State Zip Code  
MARSHFIELD WI 54449-9400

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.941181**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

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

Mailing Address 4320 COUNTY LINE ROAD HIGHWAY Q

City State Zip Code  
COLGATE WI 53017-

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
MORGAN-DEMPSEY CAPITOL MANAGEMEN OWNER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.939678**

Amount of Each Receipt this Period  
70.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 520.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 116 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. PETER M. REILAND**

Mailing Address P.O. BOX 1235

City State Zip Code  
BROOKFIELD WI 53008-1235

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.939604**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MELVIN A. RIES**

Mailing Address 3585 ROUND BARN BOULEVARD APT 329

City State Zip Code  
SANTA ROSA CA 95403-0145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
355.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.940121**

Amount of Each Receipt this Period  
30.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. THOMAS ROGERS**

Mailing Address W1194 COUNTY ROAD J

City State Zip Code  
PRINCETON WI 54968-9342

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
NEENAH SPRINGS INC PRESIDENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.941279**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 580.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 117 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. RALPH SAUL**

Mailing Address 1400 WAVERLY ROAD APT B 037

City Gladwyne      State PA      Zip Code 19035-1260

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.939465**

Amount of Each Receipt this Period  
150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. EDWARD SCHIELD**

Mailing Address P.O. BOX 309

City Medford      State WI      Zip Code 54451-0309

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
WEATHER SHIELD OWNER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
575.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.939882**

Amount of Each Receipt this Period  
300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. CARL H. SCHMUCK**

Mailing Address 4417 OAKWOODS HILLS PARKWAY

City Eau Claire      State WI      Zip Code 54701-7794

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.941361**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 118 OF 323  
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 11a     11b     11c     12  
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. DONALD L. SCHROEDER**

Mailing Address **4515 MUIR AVE**

City **SAN DIEGO** State **CA** Zip Code **92107-2318**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  
**09 / 16 / 2014**  
**Transaction ID : SA11.941246**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. CHARLES WELLS SHARTLE**

Mailing Address **P.O. BOX 1049**

City **CROCKETT** State **TX** Zip Code **75835-1049**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **SELF EMPLOYED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt  
**09 / 16 / 2014**  
**Transaction ID : SA11.939980**

Amount of Each Receipt this Period  
**200.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. RONALD SIX**

Mailing Address **1335 SAN LUCAS DRIVE**

City **BROOKFIELD** State **WI** Zip Code **53045-6611**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **365.00**

Date of Receipt  
**09 / 16 / 2014**  
**Transaction ID : SA11.941157**

Amount of Each Receipt this Period  
**40.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **340.00**

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 119 OF 323  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. ROBERT STEINER**

Mailing Address 600 W BROADWAY STE 2600

City SAN DIEGO	State CA	Zip Code 92101-3372
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation ATTORNEY
-----------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	16	/	2014

**Transaction ID : SA11.941249**

Amount of Each Receipt this Period  
150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. JAMES H. VOLLSTEDT**

Mailing Address 333 8TH STREET

City FOND DU LAC	State WI	Zip Code 54935-5234
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
315.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	16	/	2014

**Transaction ID : SA11.939972**

Amount of Each Receipt this Period  
60.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. RICHARD VON HADEN**

Mailing Address N4W31933 WHITE TAIL RUN

City DELAFIELD	State WI	Zip Code 53018-2824
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1115.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	16	/	2014

**Transaction ID : SA11.941298**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1210.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 120 OF 323  
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 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. BETTY WAITE**

Mailing Address **12 PLEASANT STREET**

City **BURLINGTON**      State **MA**      Zip Code **01803-2727**

FEC ID number of contributing federal political committee.      **C**

Name of Employer **RETIRED**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**225.00**

Date of Receipt  
**09 / 16 / 2014**  
**Transaction ID : SA11.939285**

Amount of Each Receipt this Period  
**35.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. W HOWARD WALTER**

Mailing Address **2205 FINK AVENUE**

City **WILLIAMSPORT**      State **PA**      Zip Code **17701-1215**

FEC ID number of contributing federal political committee.      **C**

Name of Employer **RETIRED**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**330.00**

Date of Receipt  
**09 / 16 / 2014**  
**Transaction ID : SA11.939726**

Amount of Each Receipt this Period  
**30.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. BETTY B. WARD**

Mailing Address **3730 RAMSEY DRIVE**

City **MARIETTA**      State **GA**      Zip Code **30062-8713**

FEC ID number of contributing federal political committee.      **C**

Name of Employer **RETIRED**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**225.00**

Date of Receipt  
**09 / 16 / 2014**  
**Transaction ID : SA11.941071**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **165.00**

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 121 OF 323  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. BEATRICE WEBSTER**

Mailing Address P.O. BOX 86

City State Zip Code  
ELM GROVE WI 53122-0086

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.940030**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. BARBARA WINTERLAND**

Mailing Address PO BOX212

City State Zip Code  
FAIRBURY IL 61739-0212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2014  
**Transaction ID : SA11.941317**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. JEFFREY BAILEY**

Mailing Address S82W15980 BASS BAY LN

City State Zip Code  
MUSKEGO WI 53150-9794

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Bailey and Associates ENGINEER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2014  
**Transaction ID : SA11.941092**

Amount of Each Receipt this Period  
400.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 900.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. PETER BOURBEAU**

Mailing Address 430 VILLAGE PLACE APT 100

City State Zip Code  
LONGWOOD FL 32779-5974

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
410.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2014  
**Transaction ID : SA11.939364**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. FRANK J. COYNE JR.**

Mailing Address 41 GORWIN DRIVE

City State Zip Code  
HANSON MA 02341-1309

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SHAW'S SUPERMARKETS GROCERY CLERK

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
560.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2014  
**Transaction ID : SA11.940249**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MARY DORAU**

Mailing Address 579 SOUTHERN OAK CIRCLE

City State Zip Code  
HARTLAND WI 53029-8005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2014  
**Transaction ID : SA11.940865**

Amount of Each Receipt this Period  
300.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 123 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. DEAN HENNEN**

Mailing Address 2430 OCEAN VIEW AVENUE APT 301

City State Zip Code  
LOS ANGELES CA 90057-1884

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2014  
**Transaction ID : SA11.941049**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. DAVID JOHNSON**

Mailing Address 8322 CORPORATE DRIVE

City State Zip Code  
MOUNT PLEASANT WI 53406-3759

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2014  
**Transaction ID : SA11.940637**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. ROBERT F. KANTIN**

Mailing Address 3445 CEDAR DRIVE

City State Zip Code  
PARK CITY UT 84098-5499

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC TRUSTEE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2014  
**Transaction ID : SA11.939708**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 124 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. MR. GORDON W. KEYES**

Mailing Address **W3554 COUNTY ROAD NN**

City **ELKHORN** State **WI** Zip Code **53121-4420**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **FARMER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**09 / 17 / 2014**  
**Transaction ID : SA11.940283**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. RONALD G. LAMPE**

Mailing Address **502 PANTHER TRAIL**

City **MONONA** State **WI** Zip Code **53716-3071**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
**09 / 17 / 2014**  
**Transaction ID : SA11.939904**

Amount of Each Receipt this Period  
**200.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. ERMA L. MOWBRAY**

Mailing Address **308 ALLISON STREET**

City **MCPHERSON** State **KS** Zip Code **67460-2802**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt  
**09 / 17 / 2014**  
**Transaction ID : SA11.940144**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **500.00**

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 125 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. MR. DAVID E. PACE**

Mailing Address **E6918 SKI HILL ROAD**

City **REEDSBURG** State **WI** Zip Code **53959-9200**

FEC ID number of contributing federal political committee. **C**

Name of Employer **DEP HOLDINGS** Occupation **CHAIRMAN OF THE BOARD**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **950.00**

Date of Receipt  
**09 / 17 / 2014**  
**Transaction ID : SA11.941052**

Amount of Each Receipt this Period  
**750.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. AVOLINE POFF**

Mailing Address **1701 PINE EDGE LANE**

City **HENRICO** State **VA** Zip Code **23229-4069**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **370.00**

Date of Receipt  
**09 / 17 / 2014**  
**Transaction ID : SA11.939992**

Amount of Each Receipt this Period  
**40.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. CLAUDE PRATER**

Mailing Address **1208 COUNTY ROAD 147**

City **BLANKET** State **TX** Zip Code **76432-5005**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**09 / 17 / 2014**  
**Transaction ID : SA11.941140**

Amount of Each Receipt this Period  
**300.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► **1090.00**

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)  
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Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. AVIS RANNEY**

Mailing Address **N8699 STATE ROAD 25**

City **BOYCEVILLE** State **WI** Zip Code **54725-5033**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **UNKNOWN**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt  
**09 / 17 / 2014**  
**Transaction ID : SA11.940227**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JOE SCHIMBERG**

Mailing Address **3111 PINNEY WOODS LN SE**

City **CEDAR RAPIDS** State **IA** Zip Code **52403-1982**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3000.00**

Date of Receipt  
**09 / 17 / 2014**  
**Transaction ID : SA11.940339**

Amount of Each Receipt this Period  
**3000.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. VICKI THOMAS**

Mailing Address **1618 LILAC LANE**

City **WARSAW** State **IN** Zip Code **46580-2228**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**09 / 17 / 2014**  
**Transaction ID : SA11.940331**

Amount of Each Receipt this Period  
**150.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **3200.00**

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. CLARENCE TREU**

Mailing Address 1037 ROSSTER RUN

City MIDDLETON State WI Zip Code 53562-3872

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2014  
**Transaction ID : SA11.939293**

Amount of Each Receipt this Period  
110.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. LAURA TRIEDOLD**

Mailing Address N7618 ENGEL RD

City WHITEWATER State WI Zip Code 53190-4143

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2014  
**Transaction ID : SA11.941110**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. JOSEPH VANBEEK**

Mailing Address W264 S7715 MT. WHITNEY AVENUE

City WAUKESHA State WI Zip Code 53189-9629

FEC ID number of contributing federal political committee. **C**

Name of Employer BUTTERS-FETTING GROUP Occupation STEAMFITTE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2014  
**Transaction ID : SA11.940940**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 860.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. MARY WUTKE**

Mailing Address **6 SHEFFORD CIRCLE**

City State Zip Code  
**MADISON WI 53719-1415**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**SELF EMPLOYED FINANCE**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1750.00**

Date of Receipt  
**09 / 17 / 2014**

**Transaction ID : SA11.941067**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. CRAIG WYLIE**

Mailing Address **5093 N WOODROW AVE**

City State Zip Code  
**FRESNO CA 93720-**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**09 / 17 / 2014**

**Transaction ID : SA11.941143**

Amount of Each Receipt this Period  
**125.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. KAREN E. COWAN**

Mailing Address **2680 HUMBOLDT ROAD, APT 1**

City State Zip Code  
**GREEN BAY WI 54311-5768**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**940.00**

Date of Receipt  
**09 / 18 / 2014**

**Transaction ID : SA11.939132**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **475.00**

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE A (FEC Form 3X)  
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Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. JOHN P. DRISCOLL**

Mailing Address 2500 N LAKEVIEW AVE APT. 1905

City State Zip Code  
CHICAGO IL 60614-4871

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 18 / 2014  
**Transaction ID : SA11.939145**

Amount of Each Receipt this Period  
150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. JOHN HERRENBRUCK**

Mailing Address 212 REED AVENUE

City State Zip Code  
MANITOWOC WI 54220-2019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
ECK INDUSTRIES, INC MANAGER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 18 / 2014  
**Transaction ID : SA11.940904**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. JAMES R. KIECKHEFER**

Mailing Address 569 ROSEDALE DRIVE

City State Zip Code  
THIENSVILLE WI 53092-1357

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
STUDENT STUDENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 18 / 2014  
**Transaction ID : SA11.939272**

Amount of Each Receipt this Period  
125.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 375.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. MR. CHARLES LASKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1432 CONE COURT  
 City EAU CLAIRE State WI Zip Code 54701-7441  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LASKER JEWELERS Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 18 / 2014  
**Transaction ID : SA11.940544**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**B. TERRIE LENERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11320 BOTHWELL WAY  
 City HOUSTON State TX Zip Code 77024-5302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 18 / 2014  
**Transaction ID : SA11.940371**  
 Amount of Each Receipt this Period 125.00  
 CONTRIBUTION

**C. MR. WALTER LUTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2467 HALL ROAD  
 City HARTFORD State WI Zip Code 53027-9016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 18 / 2014  
**Transaction ID : SA11.940386**  
 Amount of Each Receipt this Period 1000.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1225.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. EUGENE MURRAY**

Mailing Address **E9005 HUCKLBERRY LN**

City **NEW LONDON**      State **WI**      Zip Code **54961-8954**

FEC ID number of contributing federal political committee.      **C**

Name of Employer **SCOTT CONSTRUCTION, INC**      Occupation **AREA MANAGER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**275.00**

Date of Receipt  
**09 / 18 / 2014**

**Transaction ID : SA11.939102**

Amount of Each Receipt this Period  
**150.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MARK A. NELSON**

Mailing Address **14175 GOLF PARKWAY**

City **BROOKFIELD**      State **WI**      Zip Code **53005-7916**

FEC ID number of contributing federal political committee.      **C**

Name of Employer **SELF**      Occupation **PHYSICIAN**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**09 / 18 / 2014**

**Transaction ID : SA11.939851**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MRS. AILI PAQUE**

Mailing Address **1010 NEUFELD ST**

City **GREEN BAY**      State **WI**      Zip Code **54304-2239**

FEC ID number of contributing federal political committee.      **C**

Name of Employer **RETIRED**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt  
**09 / 18 / 2014**

**Transaction ID : SA11.939209**

Amount of Each Receipt this Period  
**150.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **550.00**

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
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		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. MARGAREET E. SALIBI**  
Full Name (Last, First, Middle Initial)

Mailing Address 2210 OXFORD COURT APT 6

City PLOVER State WI Zip Code 54467-2657

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 18 / 2014  
**Transaction ID : SA11.941186**

Amount of Each Receipt this Period 50.00

CONTRIBUTION

**B. MRS. ANNEROSE J. SCRIMENTI**  
Full Name (Last, First, Middle Initial)

Mailing Address 10727 N ESSEX COURT

City MEQUON State WI Zip Code 53092-8531

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 18 / 2014  
**Transaction ID : SA11.939213**

Amount of Each Receipt this Period 150.00

CONTRIBUTION

**C. HELEN E. SHANKS**  
Full Name (Last, First, Middle Initial)

Mailing Address 3378 OLD STATE ROAD 15 #115

City WABASH State IN Zip Code 46992-7979

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 09 / 18 / 2014  
**Transaction ID : SA11.939154**

Amount of Each Receipt this Period 100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00

**TOTAL** This Period (last page this line number only)..... ▶

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. ROY THOMPSON**  
 Mailing Address 4208 NORTH 27TH STREET  
 City State Zip Code  
 TACOMA WA 98407-5217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 410.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 18 / 2014  
**Transaction ID : SA11.939990**  
 Amount of Each Receipt this Period  
 80.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. AUGUST F. ZANOWSKI**  
 Mailing Address 8614 N 56TH STREET  
 City State Zip Code  
 BROWN DEER WI 53223-3024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 18 / 2014  
**Transaction ID : SA11.940230**  
 Amount of Each Receipt this Period  
 25.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. JOHN AMOROSO**  
 Mailing Address 18 BLOSSON TREE DRIVE  
 City State Zip Code  
 SHREWSBURY MA 01545-6232  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 19 / 2014  
**Transaction ID : SA11.942133**  
 Amount of Each Receipt this Period  
 150.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 255.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. RICHARD J. BELONGIA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2813 12TH STREET  
 City TWO RIVERS State WI Zip Code 54241-3311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 19 / 2014  
**Transaction ID : SA11.941629**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**B. R CHRISINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 12  
 City WINFIELD State IA Zip Code 52659-0012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 09 / 19 / 2014  
**Transaction ID : SA11.942709**  
 Amount of Each Receipt this Period 35.00  
 CONTRIBUTION

**C. CLIFFORD CONRADT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address N5057 PULS ROAD  
 City SHIOCTON State WI Zip Code 54170-9058  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 19 / 2014  
**Transaction ID : SA11.943085**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 235.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. NOLIE FISHMAN**

Mailing Address **132 NORTH LAYTON DRIVE**

City **LOS ANGELES**      State **CA**      Zip Code **90049-2059**

FEC ID number of contributing federal political committee.      **C**

Name of Employer **RETIRED**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**240.00**

Date of Receipt  
**09 / 19 / 2014**  
**Transaction ID : SA11.942366**

Amount of Each Receipt this Period  
**240.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. BERNADETTE HAAS**

Mailing Address **P.O. BOX 50**

City **LAKE FOREST**      State **IL**      Zip Code **60045-0050**

FEC ID number of contributing federal political committee.      **C**

Name of Employer **RETIRED**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**600.00**

Date of Receipt  
**09 / 19 / 2014**  
**Transaction ID : SA11.942781**

Amount of Each Receipt this Period  
**200.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. LUMAN HOLMAN**

Mailing Address **P.O. BOX 1528**

City **JACKSONVILLE**      State **TX**      Zip Code **75766-1528**

FEC ID number of contributing federal political committee.      **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF**      Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**275.00**

Date of Receipt  
**09 / 19 / 2014**  
**Transaction ID : SA11.942703**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **490.00**

**TOTAL** This Period (last page this line number only)..... ▶

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. JAMES J. JENTGEN**

Mailing Address 1778 YORK ISLAND DRIVE

City State Zip Code  
NAPLES FL 34112-4271

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 09 / 19 / 2014  
**Transaction ID : SA11.941735**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. DENNIS KURTZ**

Mailing Address N4094 ROME ROAD

City State Zip Code  
RUBICON WI 53078-9782

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 09 / 19 / 2014  
**Transaction ID : SA11.941802**

Amount of Each Receipt this Period  
75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. KARL J. LYONS**

Mailing Address 4438 CHERRY OAK LANE

City State Zip Code  
HOUSTON TX 77088-7212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
FORGED COMPONENTS INC OWNER/PRESIDENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 09 / 19 / 2014  
**Transaction ID : SA11.942367**

Amount of Each Receipt this Period  
150.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 325.00

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE A (FEC Form 3X)  
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 137 OF 323  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. JOHN M. MACK DR.**

Mailing Address **18685 ELM TERRACE DRIVE**

City **BROOKFIELD** State **WI** Zip Code **53045-4912**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**09 / 19 / 2014**  
**Transaction ID : SA11.942387**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MICHEL J. ORRADRE**

Mailing Address **67100 SARGENTS ROAD**

City **SAN ARDO** State **CA** Zip Code **93450-8901**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **RANCHER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**09 / 19 / 2014**  
**Transaction ID : SA11.941799**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. NANCY B. ROTH**

Mailing Address **8545 CARMEL VALLEY ROAD**

City **CARMEL** State **CA** Zip Code **93923-9556**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1450.00**

Date of Receipt  
**09 / 19 / 2014**  
**Transaction ID : SA11.941733**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **300.00**

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
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Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. NANCY B. ROTH**

Mailing Address **8545 CARMEL VALLEY ROAD**

City State Zip Code  
**CARMEL CA 93923-9556**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1450.00**

Date of Receipt  
**09 / 19 / 2014**

**Transaction ID : SA11.943244**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JUDITH E. STOWELL**

Mailing Address **15280 PEPPERWOOD DRIVE**

City State Zip Code  
**OMAHA NE 68154-1859**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**INFORMATION REQUESTED PER BEST EFFORTS PROJECT MANAGER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**290.00**

Date of Receipt  
**09 / 19 / 2014**

**Transaction ID : SA11.941717**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. RAYMOND N. SUTPHIN JR.**

Mailing Address **2207 N 119TH ST**

City State Zip Code  
**WAUWATOSA WI 53226-2015**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**265.00**

Date of Receipt  
**09 / 19 / 2014**

**Transaction ID : SA11.942340**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► **250.00**

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)  
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Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. GARY TEEGARDIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2323 BRENT DRIVE  
 City DODGE CITY State KS Zip Code 67801-8447  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SEPC Occupation ELECTRICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 09 / 19 / 2014  
**Transaction ID : SA11.942626**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**B. MARILYN ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1220 CUSTER COURT  
 City NORTH PLATTE State NE Zip Code 69101-6313  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF EMPLOYED Occupation SECRETARY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2014  
**Transaction ID : SA11.942742**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**C. MS. JUDY ARMSTRONG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1903 39TH ST  
 City KENOSHA State WI Zip Code 53140-5331  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2014  
**Transaction ID : SA11.942212**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 360.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. MERIT ARNOLD**

Mailing Address 2451 E VISTA WAY

City State Zip Code  
VISTA CA 92084-1905

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
R F PARTS COMPANY ENGINEER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 22 / 2014  
**Transaction ID : SA11.942124**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. ELLIOT BAKER**

Mailing Address 6755 N. LOCKWOOD AVE.

City State Zip Code  
LINCOLNWOOD IL 60712-3106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 22 / 2014  
**Transaction ID : SA11.942464**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. HENRY H. BRADLEY JR.**

Mailing Address 8033 14TH AVE NE

City State Zip Code  
SEATTLE WA 98115-4328

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 22 / 2014  
**Transaction ID : SA11.941750**

Amount of Each Receipt this Period  
150.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► 1650.00

**TOTAL** This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. DICEY S. CHILDERS**

Mailing Address **8517 JOY ROAD**

City **BLOUNTSVILLE** State **AL** Zip Code **35031-4489**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE ALABASTER BOX** Occupation **OWNER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **355.00**

Date of Receipt  
**09 / 22 / 2014**  
**Transaction ID : SA11.942745**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. DICEY S. CHILDERS**

Mailing Address **8517 JOY ROAD**

City **BLOUNTSVILLE** State **AL** Zip Code **35031-4489**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE ALABASTER BOX** Occupation **OWNER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **355.00**

Date of Receipt  
**09 / 22 / 2014**  
**Transaction ID : SA11.942985**

Amount of Each Receipt this Period  
**25.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MRS. NANCY M. CHUNG**

Mailing Address **918 CAMP FIRE DRIVE**

City **SUN PRAIRIE** State **WI** Zip Code **53590-2402**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**09 / 22 / 2014**  
**Transaction ID : SA11.942401**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► **175.00**

**TOTAL** This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. BOB CLACK**  
 Mailing Address 1410 BLUE RIDGE  
 City State Zip Code  
 WAUNAKEE WI 53597-2373  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CLACK CORP MANAGER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 22 / 2014  
**Transaction ID : SA11.943149**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. J CLUMPNER**  
 Mailing Address 4249 BAY VIEW DRIVE  
 City State Zip Code  
 STURGEON BAY WI 54235-9097  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 22 / 2014  
**Transaction ID : SA11.941635**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. ELEANOR COBB**  
 Mailing Address 131 S VISTA STREET  
 City State Zip Code  
 LOS ANGELES CA 90036-2707  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 22 / 2014  
**Transaction ID : SA11.942120**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2250.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. CHIZUKO COFFEY**

Mailing Address **2850 TARA HILLS DRIVE**

City **SAN PABLO** State **CA** Zip Code **94806-1457**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ADACHI FLORIST** Occupation **FLOWER DESIGNER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt  
**09 / 22 / 2014**  
**Transaction ID : SA11.941702**

Amount of Each Receipt this Period  
**45.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JAMES W. DOTINGA**

Mailing Address **4026 SALT SPRING DRIVE**

City **FERNDALE** State **WA** Zip Code **98248-9538**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **APARTMENT MANAGER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt  
**09 / 22 / 2014**  
**Transaction ID : SA11.941709**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. LISE M. GOGA**

Mailing Address **95 1089 PAEMOKY PLACE**

City **MILILANI** State **HI** Zip Code **96789-6524**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt  
**09 / 22 / 2014**  
**Transaction ID : SA11.942264**

Amount of Each Receipt this Period  
**300.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **395.00**

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. WILLIAM W. GREAVES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8851 N BAYSIDE DR  
 City BAYSIDE State WI Zip Code 53217-1910  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ABPM Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2014  
**Transaction ID : SA11.942456**  
 Amount of Each Receipt this Period 50.00  
 CONTRIBUTION

**B. RICHARD HOLZWORTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 924 CHEROKEE ROAD  
 City CHARLOTTE State NC Zip Code 28207-2242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2014  
**Transaction ID : SA11.941987**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**C. STEPHEN HUNDLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2396 57TH STREET N  
 City SAINT PETERSBURG State FL Zip Code 33710-4233  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2014  
**Transaction ID : SA11.942164**  
 Amount of Each Receipt this Period 150.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 300.00  
**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE A (FEC Form 3X)  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. JOAN KLUNDER**

Mailing Address **28872 VIA BUENA VISTA**

City State Zip Code  
**SAN JUAN CAPISTRANO CA 92675-5557**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**395.00**

Date of Receipt  
**09 / 22 / 2014**

**Transaction ID : SA11.942263**

Amount of Each Receipt this Period  
**75.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. ROBERT A. LOFTON**

Mailing Address **PO BOX 509**

City State Zip Code  
**CALIPATRIA CA 92233-0509**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**355.00**

Date of Receipt  
**09 / 22 / 2014**

**Transaction ID : SA11.942201**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. PATRICIA MOLLINO**

Mailing Address **515 N BAY AVENUE**

City State Zip Code  
**MASSAPEQUA NY 11758-2046**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**215.00**

Date of Receipt  
**09 / 22 / 2014**

**Transaction ID : SA11.941700**

Amount of Each Receipt this Period  
**20.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► **195.00**

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. JOAN MOSLING**

Mailing Address 291 COUNTY ROAD FF

City State Zip Code  
PICKETT WI 54964-9512

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 22 / 2014  
**Transaction ID : SA11.942467**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. PETER MOSLING**

Mailing Address 291 COUNTY ROAD FF

City State Zip Code  
PICKETT WI 54964-9512

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 22 / 2014  
**Transaction ID : SA11.942466**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. VERA NELSON**

Mailing Address 614 WILLIAMS STREET

City State Zip Code  
VIROQUA WI 54665-1051

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
335.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 22 / 2014  
**Transaction ID : SA11.941684**

Amount of Each Receipt this Period  
20.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5020.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 147 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. VERA NELSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 614 WILLIAMS STREET

City VIROQUA	State WI	Zip Code 54665-1051
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
335.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2014

**Transaction ID : SA11.942983**

Amount of Each Receipt this Period  
35.00

CONTRIBUTION

**B. DAVID SCHLAPMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 15565 POMONA ROAD

City BROOKFIELD	State WI	Zip Code 53005-3616
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FORRER BUSINESS INTERIORS	Occupation VICE PRESIDENT OF SALES
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2014

**Transaction ID : SA11.941496**

Amount of Each Receipt this Period  
150.00

CONTRIBUTION

**C. ALVIN P. SIEG**  
Full Name (Last, First, Middle Initial)

Mailing Address 2839 6TH STREET

City EAU CLAIRE	State WI	Zip Code 54703-2898
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2014

**Transaction ID : SA11.942220**

Amount of Each Receipt this Period  
30.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

215.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 148 OF 323  
(check only one)  
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 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. PATRICIA A. WYSONG**

Mailing Address **2707 CLUBLAKE TRAIL**

City State Zip Code  
**MCKINNEY TX 75070-4009**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**BRAD WYSONG, MDPA RADIOLOGIST**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**09 / 22 / 2014**

**Transaction ID : SA11.942790**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JAMES ALBRIGHT**

Mailing Address **51 BROOKSIDE BOULEVARD**

City State Zip Code  
**WEST HARTFORD CT 06107-1108**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**09 / 23 / 2014**

**Transaction ID : SA11.941820**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. THOMAS H. BENTLEY III**

Mailing Address **4080 N PORT WASHINGTON ROAD**

City State Zip Code  
**MILWAUKEE WI 53212-1132**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**BENTLEY WORLD PACKAGING OWNER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**400.00**

Date of Receipt  
**09 / 23 / 2014**

**Transaction ID : SA11.942347**

Amount of Each Receipt this Period  
**200.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **500.00**

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 149 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. ROBERT BLANCH**  
 Mailing Address 19618 76TH AVE NE  
 City State Zip Code  
 KENMORE WA 98028-2070  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 BOEING PAINTER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11.942131**  
 Amount of Each Receipt this Period  
 55.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JOHN W. CRAMER JR.**  
 Mailing Address 23 KEEL WAY  
 City State Zip Code  
 MASHPEE MA 02649-4012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11.942321**  
 Amount of Each Receipt this Period  
 300.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. WILLIAM R. DESENS**  
 Mailing Address N71W13876 NICOLET COURT  
 City State Zip Code  
 MENOMONEE FALLS WI 53051-5249  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 WI DEPT OF TRANS ENGINEERING TECH  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11.941632**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 405.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 150 OF 323  
(check only one)  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. WILLIAM GRIFFIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 149 STONER DRIVE  
 City WEST HARTFORD State CT Zip Code 06107-1309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 23 / 2014  
**Transaction ID : SA11.941821**  
 Amount of Each Receipt this Period 200.00  
 CONTRIBUTION

**B. G G. HASSLOCHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 219 LABURNUM DRIVE  
 City SAN ANTONIO State TX Zip Code 78209-2123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FRONTIER ENTERPRISES Occupation CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 23 / 2014  
**Transaction ID : SA11.941762**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**C. ROBERT HEDAYA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 429 AVENUE T  
 City BROOKLYN State NY Zip Code 11223-4001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 09 / 23 / 2014  
**Transaction ID : SA11.941814**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. BARBARA D. HEGWOOD**  
 Mailing Address **S79 W26855 WILTON ROAD**  
 City State Zip Code  
**EAGLE WI 53119-**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
**RETIRED RETIRED**  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**350.00**

Date of Receipt  
**09 / 23 / 2014**  
**Transaction ID : SA11.942908**  
 Amount of Each Receipt this Period  
**100.00**  
**CONTRIBUTION**

Full Name (Last, First, Middle Initial)  
**B. ROGER F. HEILERT**  
 Mailing Address **N39 W23401 BROKEN HILL CIRCLE N**  
 City State Zip Code  
**PEWAUKEE WI 53072-2762**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
**RETIRED RETIRED**  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**450.00**

Date of Receipt  
**09 / 23 / 2014**  
**Transaction ID : SA11.942642**  
 Amount of Each Receipt this Period  
**100.00**  
**CONTRIBUTION**

Full Name (Last, First, Middle Initial)  
**C. CLAIRE HOLLAND**  
 Mailing Address **5508 SADDLEWOOD LANE**  
 City State Zip Code  
**BRENTWOOD TN 37027-4733**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
**HOMEMAKER HOMEMAKER**  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt  
**09 / 23 / 2014**  
**Transaction ID : SA11.942126**  
 Amount of Each Receipt this Period  
**100.00**  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **300.00**  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 152 OF 323
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. BARBARA HUBER**  
Full Name (Last, First, Middle Initial)

Mailing Address 217 W 100 N

City WINAMAC State IN Zip Code 46996-8010

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
09 / 23 / 2014  
**Transaction ID : SA11.942655**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B. PETER JENSEN**  
Full Name (Last, First, Middle Initial)

Mailing Address W5202 LARSON ROAD

City RIO State WI Zip Code 53960-9575

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 740.00

Date of Receipt  
09 / 23 / 2014  
**Transaction ID : SA11.941959**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C. MR. JAMES N. JOHNSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 351 W. WILSON ST., #5

City MADISON State WI Zip Code 53703-3676

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
09 / 23 / 2014  
**Transaction ID : SA11.942254**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 800.00

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. FERENC KACSINTA**  
 Mailing Address 7323 CARTWRIGHT AVE  
 City State Zip Code  
 SUN VALLEY CA 91352-5107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11.941957**  
 Amount of Each Receipt this Period  
 150.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. DAVID S. KENYON**  
 Mailing Address P.O. BOX 205  
 City State Zip Code  
 OAKFIELD WI 53065-0205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 208.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11.941961**  
 Amount of Each Receipt this Period  
 35.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. JOAN KLUNDER**  
 Mailing Address 28872 VIA BUENA VISTA  
 City State Zip Code  
 SAN JUAN CAPISTRANO CA 92675-5557  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 395.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11.941756**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 235.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. JEFFREY KOGA**

Mailing Address 1960 TUMBLEBROOK ROAD

City State Zip Code  
NEENAH WI 54956-1230

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
09 / 23 / 2014  
**Transaction ID : SA11.942557**

Amount of Each Receipt this Period  
**75.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. CARL LAWYER**

Mailing Address 1423 4TH STREET

City State Zip Code  
MARYSVILLE WA 98270-5036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
PACIFIC GRINDING WHEEL COMPANY KILN OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **235.00**

Date of Receipt  
09 / 23 / 2014  
**Transaction ID : SA11.942797**

Amount of Each Receipt this Period  
**80.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. DOUGLAS J. MACLEOD**

Mailing Address 1709 NORTH PARK AVENUE, APT 3

City State Zip Code  
CHICAGO IL 60614-5760

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
09 / 23 / 2014  
**Transaction ID : SA11.941770**

Amount of Each Receipt this Period  
**200.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► **355.00**

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 155 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. EDWARD S. MARTIN**

Mailing Address 1046 WOODBERRY ROAD

City State Zip Code  
NEW KENSINGTON PA 15068-5308

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11.941752**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JOHN MUELLER**

Mailing Address 1414 SILVERADO TRAIL S

City State Zip Code  
SAINT HELENA CA 94574-9798

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11.942424**

Amount of Each Receipt this Period  
225.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. VERA NELSON**

Mailing Address 614 WILLIAMS STREET

City State Zip Code  
VIROQUA WI 54665-1051

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
335.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11.941922**

Amount of Each Receipt this Period  
35.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 460.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. MARY NEWTON**

Mailing Address **607 E TAYLOR RUN PKWY**

City **ALEXANDRIA**      State **VA**      Zip Code **22314-4929**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1735.00**

Date of Receipt  
**09 / 23 / 2014**  
**Transaction ID : SA11.941772**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JOHN NORDSTROM**

Mailing Address **8221 WHITE CLIFF ROAD**

City **EGG HARBOR**      State **WI**      Zip Code **54209-9640**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt  
**09 / 23 / 2014**  
**Transaction ID : SA11.942021**

Amount of Each Receipt this Period  
**175.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. SHAUN F. O'MALLEY**

Mailing Address **8000 SEMINOLE STREET APT 1**

City **PHILADELPHIA**      State **PA**      Zip Code **19118-3955**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **208.65**

Date of Receipt  
**09 / 23 / 2014**  
**Transaction ID : SA11.941827**

Amount of Each Receipt this Period  
**68.65**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► **343.65**

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)  
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 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. JAYNE RICKERT**

Mailing Address 700 QUINLEN DR APT 338

City State Zip Code  
PEWAUKEE WI 53072-1832

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
395.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11.941853**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. GREGORY P. SAUER**

Mailing Address N2685 POTATO RIDGE ROAD

City State Zip Code  
LA CROSE WI 54601-3006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
GPS ANESTHESIA SERVICES, LLC CRNA

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11.942971**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MRS. MARY JO JO SAZAMA**

Mailing Address 2800 THIELMAN STREET # 10 A

City State Zip Code  
MERRILL WI 54452-3833

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11.941540**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1200.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 158 OF 323  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. CARL H. SCHMUCK**

Mailing Address 4417 OAKWOODS HILLS PARKWAY

City State Zip Code  
EAU CLAIRE WI 54701-7794

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11.941849**

Amount of Each Receipt this Period  
20.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. EDWIN A. SCHRANK**

Mailing Address 128 HICKORY NUT LANE

City State Zip Code  
EDGERTON WI 53534-9318

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11.943093**

Amount of Each Receipt this Period  
20.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. BERNICE SMOLEN**

Mailing Address 2567 28TH AVENUE W

City State Zip Code  
SEATTLE WA 98199-3354

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11.941935**

Amount of Each Receipt this Period  
75.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 115.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. GARY TEEGARDIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2323 BRENT DRIVE  
 City DODGE CITY State KS Zip Code 67801-8447  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SEPC Occupation ELECTRICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11.942627**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**B. ALFRED THOMASON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 50391  
 City NASHVILLE State TN Zip Code 37205-0391  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11.941769**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C. WAYNE A. TOENJES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1104 FLINTS ROAD  
 City WAUSAU State WI Zip Code 54401-9049  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MAJOR INDUSTRIES Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11.942208**  
 Amount of Each Receipt this Period  
 150.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 410.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)  
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 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. CARLA M. TRENT**  
 Mailing Address 324 CHESTNUT HILL COURT  
 APT 16  
 City THOUSAND OAKS State CA Zip Code 91360-3893  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11.941715**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. W HOWARD WALTER**  
 Mailing Address 2205 FINK AVENUE  
 City WILLIAMSPORT State PA Zip Code 17701-1215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11.941747**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. WILLIAM WATERFIELD JR.**  
 Mailing Address 960 ANDOVER WAY  
 City LOS ALTOS State CA Zip Code 94024-7006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF EMPLOYED Occupation PSYCHIATRIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11.942327**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. LARRY W. WEIDIG**

Mailing Address **3819 SOUTH 18TH STREET**

City State Zip Code  
**SHEBOYGAN WI 53081-7111**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**375.00**

Date of Receipt  
**09 / 23 / 2014**  
**Transaction ID : SA11.942384**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. CHARLES J. WEIR**

Mailing Address **19355 CYPRESS RIDGE TER UNIT 806**

City State Zip Code  
**LEESBURG VA 20176-6916**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt  
**09 / 23 / 2014**  
**Transaction ID : SA11.942938**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. PEGGY J. WHITE**

Mailing Address **N49 W15914 CAITLIN COURT**

City State Zip Code  
**MENOMONEE FALLS WI 53051-7543**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**225.00**

Date of Receipt  
**09 / 23 / 2014**  
**Transaction ID : SA11.942210**

Amount of Each Receipt this Period  
**75.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **175.00**

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
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Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. MARGARET ADAMS**

Mailing Address 8240 HEALY DR

City State Zip Code  
 MOBILE AL 36695-4919

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 600.00

Date of Receipt  
 09 / 24 / 2014  
**Transaction ID : SA11.942837**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. DAVID COOKSON**

Mailing Address 4910 LAKE MENDOTA DRIVE

City State Zip Code  
 MADISON WI 53705-1376

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 09 / 24 / 2014  
**Transaction ID : SA11.942105**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. CARL GAUSEWITZ**

Mailing Address 2483 WESTBROOK ST SE

City State Zip Code  
 MAGNOLIA OH 44643-9705

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 RETIRED SELF

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 230.00

Date of Receipt  
 09 / 24 / 2014  
**Transaction ID : SA11.941952**

Amount of Each Receipt this Period  
 50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
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Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. PRISCILLA GOODYEAR**  
 Mailing Address 10042 SIGNET CIRCLE  
 City State Zip Code  
 HUNTINGTON BEACH CA 92646-6631  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 09 / 24 / 2014  
**Transaction ID : SA11.942761**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. STEPHEN HARRIS**  
 Mailing Address 2575 S PARKSIDE CT  
 City State Zip Code  
 NEW BERLIN WI 53151-2955  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 09 / 24 / 2014  
**Transaction ID : SA11.942765**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MARY C. KREZ**  
 Mailing Address 1580 ARBORETUM DR  
 City State Zip Code  
 OSHKOSH WI 54901-2790  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 09 / 24 / 2014  
**Transaction ID : SA11.943170**  
 Amount of Each Receipt this Period  
 150.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 323
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. DOUGLAS R. MCKISSACK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 BITTERROOT LANE  
 City SAVANNAH State GA Zip Code 31419-9507  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GULFSTREAM AEROSPACE Occupation ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 24 / 2014  
**Transaction ID : SA11.941754**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**B. MARY NEWTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 607 E TAYLOR RUN PKWY  
 City ALEXANDRIA State VA Zip Code 22314-4929  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1735.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 24 / 2014  
**Transaction ID : SA11.942813**  
 Amount of Each Receipt this Period  
 225.00  
 CONTRIBUTION

**C. THOMAS T. ROGERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address W1194 CO. HWY. J  
 City PRINCETON State WI Zip Code 54968-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NEENAH SPRINGS, INC. Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 24 / 2014  
**Transaction ID : SA11.942459**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 825.00  
**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)  
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Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. FREDERICK C. STEINHAUER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5010 HAMMERSLEY ROAD  
 City MADISON State WI Zip Code 53711-2616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MADISON DAIRY Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 24 / 2014  
**Transaction ID : SA11.942026**  
 Amount of Each Receipt this Period 500.00  
 CONTRIBUTION

**B. ROBERT JOHN ABRAMOWSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9253 SPINDLE TOP CT  
 City FRANKLIN State WI Zip Code 53132-1963  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NEWTEK BUSINESS SERVICES Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 25 / 2014  
**Transaction ID : SA11.943897**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**C. MRS. JOYCE I. BANT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6937 US HWY 51  
 City HAZELHURST State WI Zip Code 54531-9652  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 25 / 2014  
**Transaction ID : SA11.943955**  
 Amount of Each Receipt this Period 50.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 650.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 166 OF 323
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. MR. WILLIAM O. BRACHMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 10101 CEDAR CREEK ROAD

City CEDARBURG	State WI	Zip Code 53012-9757
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation SELF
--------------------------	--------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2014

**Transaction ID : SA11.943944**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

**B. BERTIL E. BRUNK**  
Full Name (Last, First, Middle Initial)

Mailing Address W3885 CREEK LANE

City LAKE GENEVA	State WI	Zip Code 53147-3824
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer BRUNK INDUSTRIES, INC	Occupation OWNER, PRESIDENT & CFO
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
850.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2014

**Transaction ID : SA11.942213**

Amount of Each Receipt this Period  
450.00

CONTRIBUTION

**C. CAROLYN DAMON**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 791719

City PAIA	State HI	Zip Code 96779-1719
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2014

**Transaction ID : SA11.944172**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. MRS. RUTH A. DEBROUX**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1940 WOODSIDE LANE  
 City RICHFIELD State WI Zip Code 53076-9793  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 25 / 2014  
**Transaction ID : SA11.941808**  
 Amount of Each Receipt this Period 60.00  
 CONTRIBUTION

**B. BOYD ELLESTAD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 30508 SANTA LUNA DR  
 City RANCHO PALOS VERDES State CA Zip Code 90275-6318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 09 / 25 / 2014  
**Transaction ID : SA11.943860**  
 Amount of Each Receipt this Period 50.00  
 CONTRIBUTION

**C. SUSAN GAIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 715 LINDSAY ROAD  
 City PEWAUKEE State WI Zip Code 53072-1948  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED PER BEST EFF( Occupation INFORMATION REQUESTED PER BEST EFF  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 25 / 2014  
**Transaction ID : SA11.941512**  
 Amount of Each Receipt this Period 125.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 235.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. MARK GALLISON**

Mailing Address 1212 SYCAMORE STREET

City TURLOCK	State CA	Zip Code 95380-4147
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2014

**Transaction ID : SA11.943933**

Amount of Each Receipt this Period  
180.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. THOMAS GOULD**

Mailing Address 10248 N WESTPORT CIRCLE

City MEQUON	State WI	Zip Code 53092-5739
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2014

**Transaction ID : SA11.942027**

Amount of Each Receipt this Period  
150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. ROGER A. GRONERT**

Mailing Address 7806 DASSETT COURT APT T2

City ANNANDALE	State VA	Zip Code 22003-4809
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2014

**Transaction ID : SA11.943900**

Amount of Each Receipt this Period  
20.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. KENNETH W GROTHMANN**  
Mailing Address **W337S5059 ROAD GG**  
City **DOUSMAN** State **WI** Zip Code **53118-9733**  
FEC ID number of contributing federal political committee. **C**  
Name of Employer **AMERICAN ENTERTAINMENT** Occupation **BUSINESS OWNER**  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **3250.00**

Date of Receipt  
**09 / 25 / 2014**  
**Transaction ID : SA11.943109**  
Amount of Each Receipt this Period  
**3000.00**  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JAMES HANCOCK**  
Mailing Address **12330 SCARCELLA LN**  
City **STAFFORD** State **TX** Zip Code **77477-1610**  
FEC ID number of contributing federal political committee. **C**  
Name of Employer **SELF** Occupation **CONSULTING GEOLOGIST**  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **210.90**

Date of Receipt  
**09 / 25 / 2014**  
**Transaction ID : SA11.944170**  
Amount of Each Receipt this Period  
**30.30**  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. HERBERT ALAN LEVIN**  
Mailing Address **724 EAST GRINNEL DR**  
City **BURBANK** State **CA** Zip Code **91501-1720**  
FEC ID number of contributing federal political committee. **C**  
Name of Employer **DOJ OF THE STATE OF CALIFORNIA** Occupation **LAWYER**  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **1105.00**

Date of Receipt  
**09 / 25 / 2014**  
**Transaction ID : SA11.944175**  
Amount of Each Receipt this Period  
**105.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **3135.30**  
**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. JOSEPH P. MARNELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 600 SOUTH 2ND STREET, APT 704  
 City State Zip Code  
 MINNEAPOLIS MN 55401-2175  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2014  
**Transaction ID : SA11.942013**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**B. DAVID S. MARTIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 281 KENNER CREEK ROAD  
 City State Zip Code  
 DEATSVILLE AL 36022-6027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2014  
**Transaction ID : SA11.941766**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**C. AL MAYERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1669 YANKEE DOODLE ROAD  
 City State Zip Code  
 SAINT PAUL MN 55121-1754  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2014  
**Transaction ID : SA11.942032**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. URBAN NEVILLE**

Mailing Address **875 HAMPTONSHIRE DRIVE**

City **CLEVES** State **OH** Zip Code **45002-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
**09 / 25 / 2014**  
**Transaction ID : SA11.942035**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JOSEPH HOWARD NIMO**

Mailing Address **14003 NORTHTOWN CT. APT. B  
APT B**

City **TAMPA** State **FL** Zip Code **33613-3482**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt  
**09 / 25 / 2014**  
**Transaction ID : SA11.943856**

Amount of Each Receipt this Period  
**20.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. ROBERT PETRICCA**

Mailing Address **P.O. BOX 302**

City **LANESBORO** State **MA** Zip Code **01237-0302**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt  
**09 / 25 / 2014**  
**Transaction ID : SA11.943869**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **220.00**

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
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Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. PATRICK F. POISL**

Mailing Address **3810 176TH AVENUE**

City State Zip Code  
**KENOSHA WI 53144-7616**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**VETERAN TRUCK INC TRUCK DRIVER**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **355.00**

Date of Receipt  
**09 / 25 / 2014**

**Transaction ID : SA11.943952**

Amount of Each Receipt this Period  
**40.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. RAYMOND SVENDSEN**

Mailing Address **1100 FOUNTAIN HILLS DRIVE APT 308**

City State Zip Code  
**MOUNT PLEASANT WI 53406-6716**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt  
**09 / 25 / 2014**

**Transaction ID : SA11.942574**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. DANIEL ULIK**

Mailing Address **9969 S 60TH STREET**

City State Zip Code  
**FRANKLIN WI 53132-8824**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**STU'S FLOORING MANAGER**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt  
**09 / 25 / 2014**

**Transaction ID : SA11.942028**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ **340.00**

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)  
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. MR. RICHARD WEAVER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1502 RED TAIL DRIVE

City VERONA State WI Zip Code 53593-7968

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2014

**Transaction ID : SA11.944162**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

**B. HOWARD A. WILL JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address N9242 S SHORE DRIVE

City EAST TROY State WI Zip Code 53120-2178

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2014

**Transaction ID : SA11.941585**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

**C. RIBBLE FOR CONGRESS**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 7200

City APPLETON State WI Zip Code 54912-7069

FEC ID number of contributing federal political committee. **C** C00463620

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 30000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2014

**Transaction ID : SA11.948275**

Amount of Each Receipt this Period  
 30000.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. JANET ALFONSO**

Mailing Address **6402 SHARPSBURG DRIVE**

City **MADISON** State **WI** Zip Code **53718-3160**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **825.00**

Date of Receipt  
**09 / 26 / 2014**  
**Transaction ID : SA11.942095**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. DIANE C. BARNES**

Mailing Address **1 MCKNIGHT PL. APT. 256**

City **SAINT LOUIS** State **MO** Zip Code **63124-1983**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**09 / 26 / 2014**  
**Transaction ID : SA11.942107**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. JEANNE S. BARNES**

Mailing Address **165 CHRISTOPHER STREET APT 6 CC  
APT 6 CC**

City **NEW YORK** State **NY** Zip Code **10014-2803**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **510.00**

Date of Receipt  
**09 / 26 / 2014**  
**Transaction ID : SA11.941621**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► **200.00**

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)  
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Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. MRS. DOROTHY M. BRICE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2170 JEN RAE ROAD  
 City GREEN BAY State WI Zip Code 54311-6348  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 26 / 2014  
**Transaction ID : SA11.942057**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**B. EVERETT R. CASTLE JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6157 E SUNNY DRIVE  
 City TUCSON State AZ Zip Code 85712-2339  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF EMPLOYED Occupation DOCTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 26 / 2014  
**Transaction ID : SA11.941623**  
 Amount of Each Receipt this Period 200.00  
 CONTRIBUTION

**C. R CHRISINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 12  
 City WINFIELD State IA Zip Code 52659-0012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 09 / 26 / 2014  
**Transaction ID : SA11.942895**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. KAREN E. COWAN**

Mailing Address 2680 HUMBOLDT ROAD, APT 1

City State Zip Code  
GREEN BAY WI 54311-5768

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
940.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : SA11.942058**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. CHRISTOPHER FLANAGAN**

Mailing Address 3333 E BROWN ROAD

City State Zip Code  
NEW CASTLE IN 47362-9325

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
CHRYSLER CORPORATION FACTORY

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : SA11.942036**

Amount of Each Receipt this Period  
150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. VIRGINIA FROELKER**

Mailing Address 4496 BIG CREEK ROAD

City State Zip Code  
GERALD MO 63037-2616

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
435.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : SA11.941589**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE A (FEC Form 3X)  
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 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. ROBERT FUREK**

Mailing Address 1370 CUTLER COURT

City State Zip Code  
MARCO ISLAND FL 34145-5841

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : SA11.941671**

Amount of Each Receipt this Period  
150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. FRED GELLERUP**

Mailing Address N4311 COUNTY ROAD MM

City State Zip Code  
WAUTOMA WI 54982-5399

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : SA11.943221**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MICHAEL KEELAN JR.**

Mailing Address 13130 WATERTOWN PLANK ROAD UNTI 1

City State Zip Code  
ELM GROVE WI 53122-2237

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:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : SA11.942103**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 350.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. KENNETH W. KEITH**

Mailing Address **N28W6800 ALYCE STREET, APT 106**

City **CEDARBURG** State **WI** Zip Code **53012-2656**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**09 / 26 / 2014**  
**Transaction ID : SA11.941928**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. TERRIE LENERT**

Mailing Address **11320 BOTHWELL WAY**

City **HOUSTON** State **TX** Zip Code **77024-5302**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt  
**09 / 26 / 2014**  
**Transaction ID : SA11.942176**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. SCOTT A. MCDERMOTT**

Mailing Address **S27 W29517 JARMON ROAD**

City **WAUKESHA** State **WI** Zip Code **53188-9224**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SOURCE ONE HEALTHCARE** Occupation **MEDICAL IMAGING**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
**09 / 26 / 2014**  
**Transaction ID : SA11.941906**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **250.00**

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. CLAYTON J. MORGAN**

Mailing Address **38026 SHERWOOD STREET**

City **WESTLAND** State **MI** Zip Code **48185-3744**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  
**09 / 26 / 2014**  
**Transaction ID : SA11.941753**

Amount of Each Receipt this Period  
**300.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. BETH L. MUELLER**

Mailing Address **7585 BLUE LAKE ISLAND ROAD**

City **MINOCQUA** State **WI** Zip Code **54548-9538**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FRED MUELLER AUTOMOTIVE** Occupation **SECRETARY**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt  
**09 / 26 / 2014**  
**Transaction ID : SA11.942020**

Amount of Each Receipt this Period  
**300.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. JOHN R. PANKRATZ**

Mailing Address **9219 BEVELY PLACE**

City **WAUWATOSA** State **WI** Zip Code **53226-1712**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**09 / 26 / 2014**  
**Transaction ID : SA11.941916**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **430.00**

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. CYNTHIA RAEDEKE**

Mailing Address 1793 PINE WOOD ROAD

City State Zip Code  
SAINT CROIX FALLS WI 54024-7536

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : SA11.942259**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MICHAEL RAUTERBERG**

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : SA11.941598**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MELVIN A. RIES**

Mailing Address 3585 ROUND BARN BOULEVARD APT 329

City State Zip Code  
SANTA ROSA CA 95403-0145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
355.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : SA11.942689**

Amount of Each Receipt this Period  
25.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 375.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. JOHN SCEPANSKI**

Mailing Address **455 E MORGAN AVENUE**

City **MILWAUKEE**      State **WI**      Zip Code **53207-3309**

FEC ID number of contributing federal political committee.      **C**

Name of Employer      Occupation  
**RETIRED**      **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1140.00**

Date of Receipt  
**09 / 26 / 2014**

**Transaction ID : SA11.942093**

Amount of Each Receipt this Period  
**200.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. ROSANNE P. SEDER**

Mailing Address **W130N6239 RIVER DRIVE**

City **MENOMONEE FALLS**      State **WI**      Zip Code **53051-6041**

FEC ID number of contributing federal political committee.      **C**

Name of Employer      Occupation  
**RETIRED**      **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**220.00**

Date of Receipt  
**09 / 26 / 2014**

**Transaction ID : SA11.942068**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. RICHARD WILLIAM SMITH**

Mailing Address **715 BENT STREET**

City **ELGIN**      State **IL**      Zip Code **60120-7954**

FEC ID number of contributing federal political committee.      **C**

Name of Employer      Occupation  
**RETIRED**      **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**230.00**

Date of Receipt  
**09 / 26 / 2014**

**Transaction ID : SA11.942877**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **300.00**

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
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Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. BERNICE SMOLEN**

Mailing Address **2567 28TH AVENUE W**

City **SEATTLE**      State **WA**      Zip Code **98199-3354**

FEC ID number of contributing federal political committee.      **C**

Name of Employer      Occupation  
**RETIRED**      **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**230.00**

Date of Receipt  
**09 / 26 / 2014**

**Transaction ID : SA11.943044**

Amount of Each Receipt this Period  
**35.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JON WEIS**

Mailing Address **S36W27905 ROBIN HILL CIR**

City **WAUKESHA**      State **WI**      Zip Code **53189-6109**

FEC ID number of contributing federal political committee.      **C**

Name of Employer      Occupation  
**RETIRED**      **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**850.00**

Date of Receipt  
**09 / 26 / 2014**

**Transaction ID : SA11.943198**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. BRUCE E. WENCEL**

Mailing Address **5129 WHITCOMB DRIVE**

City **MADISON**      State **WI**      Zip Code **53711-2636**

FEC ID number of contributing federal political committee.      **C**

Name of Employer      Occupation  
**RETIRED**      **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**760.00**

Date of Receipt  
**09 / 26 / 2014**

**Transaction ID : SA11.943225**

Amount of Each Receipt this Period  
**200.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► **485.00**

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)  
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Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. THOMAS P. YOUNG**

Mailing Address **7 CENTER CROSSING**

City State Zip Code  
**FAIRPORT NY 14450-8715**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**HARTER SECREST & EMERY, LLP ATTORNEY**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**09 / 26 / 2014**

**Transaction ID : SA11.943052**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JANA BARTLIT**

Mailing Address **604 CLIFFGATE LANE**

City State Zip Code  
**CASTLE ROCK CO 80108-8395**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**HOMEMAKER HOMEMAKER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**09 / 29 / 2014**

**Transaction ID : SA11.944047**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. ROBERT E. BLEDSOE**

Mailing Address **S5240 DAMAR PRIVATE DRIVE**

City State Zip Code  
**EAU CLAIRE WI 54701-9974**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**390.00**

Date of Receipt  
**09 / 29 / 2014**

**Transaction ID : SA11.943412**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► **800.00**

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. DAVID T. BOHLMAN**

Mailing Address **5815 AMERICAN PARKWAY; APT 316**

City State Zip Code  
**MADISON WI 53718-8352**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**400.00**

Date of Receipt  
**09 / 29 / 2014**

**Transaction ID : SA11.943553**

Amount of Each Receipt this Period  
**200.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. ERNEST ELLISON II**

Mailing Address **6720 CHURCHILL PARK COURT**

City State Zip Code  
**CHARLOTTE NC 28210-3480**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**600.00**

Date of Receipt  
**09 / 29 / 2014**

**Transaction ID : SA11.943614**

Amount of Each Receipt this Period  
**300.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. PATRICIA L. FIEDLER**

Mailing Address **3425 VALLEY CREEK CIRCLE**

City State Zip Code  
**MIDDLETON WI 53562-1991**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt  
**09 / 29 / 2014**

**Transaction ID : SA11.943288**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **600.00**

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE A (FEC Form 3X)  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. JOHN KOLPANEN**

Mailing Address 709 E 6TH STREET APT 2

City State Zip Code  
OWEN WI 54460-9523

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2014  
**Transaction ID : SA11.943472**

Amount of Each Receipt this Period  
75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. W CLARK LAMBERT**

Mailing Address 66 PLYMOUTH STREET

City State Zip Code  
MONTCLAIR NJ 07042-2137

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF EMPLOYED PHYSICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2014  
**Transaction ID : SA11.943269**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. CHARLES ROSKIE**

Mailing Address W3963 STATE ROAD 23

City State Zip Code  
MONTELLO WI 53949-8635

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED UNKNOWN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
295.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2014  
**Transaction ID : SA11.943411**

Amount of Each Receipt this Period  
60.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 385.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. CLAUDIA L. SIESENNOP**  
 Mailing Address **W5233 STERLINGWORTH COURT**  
 City State Zip Code  
**ELKHORN WI 53121-2782**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
**HOMEMAKER HOMEMAKER**  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**09 / 29 / 2014**  
**Transaction ID : SA11.943447**  
 Amount of Each Receipt this Period  
**50.00**  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. VERA VINCZ**  
 Mailing Address **26 PLYMOUTH PLACE**  
 City State Zip Code  
**EDISON NJ 08837-3130**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
**RETIRED RETIRED**  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**395.00**

Date of Receipt  
**09 / 29 / 2014**  
**Transaction ID : SA11.943366**  
 Amount of Each Receipt this Period  
**200.00**  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. VERA VINCZ**  
 Mailing Address **26 PLYMOUTH PLACE**  
 City State Zip Code  
**EDISON NJ 08837-3130**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
**RETIRED RETIRED**  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**395.00**

Date of Receipt  
**09 / 29 / 2014**  
**Transaction ID : SA11.943916**  
 Amount of Each Receipt this Period  
**60.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **310.00**  
**TOTAL** This Period (last page this line number only)..... ▶

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ITEMIZED RECEIPTS**

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	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. EDMUND WABISZEWSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address W1173 ILLINOIS AVENUE  
 City GREEN LAKE State WI Zip Code 54941-9706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 29 / 2014  
**Transaction ID : SA11.943609**  
 Amount of Each Receipt this Period 200.00  
 CONTRIBUTION

**B. RICHARD WOLDING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 68  
 City NELSONVILLE State WI Zip Code 54458-0068  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF EMPLOYED Occupation TRUCKING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 29 / 2014  
**Transaction ID : SA11.943422**  
 Amount of Each Receipt this Period 400.00  
 CONTRIBUTION

**C. LEON T. WRIGHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1006 SLATEWORTH DR.  
 City DURHAM State NC Zip Code 27703-6180  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2014  
**Transaction ID : SA11.943401**  
 Amount of Each Receipt this Period 100.00  
 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 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. AUGUST F. ZANOWSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8614 N 56TH STREET  
 City BROWN DEER State WI Zip Code 53223-3024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 09 / 29 / 2014  
**Transaction ID : SA11.943440**  
 Amount of Each Receipt this Period 25.00  
 CONTRIBUTION

**B. MARGARET ADAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8240 HEALY DR  
 City MOBILE State AL Zip Code 36695-4919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 30 / 2014  
**Transaction ID : SA11.943992**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**C. MS. RUTH E. ALT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 810 W CLOVERNOOK LANE  
 City GLENDALE State WI Zip Code 53217-4122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KORTHAUSER AND SONS Occupation GROWER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2014  
**Transaction ID : SA11.943595**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 225.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 189 OF 323
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. PAUL J. APPELT**  
Full Name (Last, First, Middle Initial)

Mailing Address **N9225 HILCREST ROAD**

City **BELLEVILLE** State **WI** Zip Code **53508-8911**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ECI** Occupation **CONSULTANT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**09 / 30 / 2014**  
**Transaction ID : SA11.943552**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

**B. MS. JUDY ARMSTRONG**  
Full Name (Last, First, Middle Initial)

Mailing Address **1903 39TH ST**

City **KENOSHA** State **WI** Zip Code **53140-5331**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**09 / 30 / 2014**  
**Transaction ID : SA11.943544**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

**C. WILLIS ASHBY**  
Full Name (Last, First, Middle Initial)

Mailing Address **7100 E PRENTICE AVENUE**

City **GREENWOOD VILLAGE** State **CO** Zip Code **80111-1650**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**09 / 30 / 2014**  
**Transaction ID : SA11.943382**

Amount of Each Receipt this Period  
**150.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **350.00**

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
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Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. MR. FRANK J. BAUS**

Mailing Address 5518 FORK RD

City State Zip Code  
HARTFORD WI 53027-9441

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
FRANKEN MACHINING, LLC SELF EMPLOYED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11.943458**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JAMES J. BEDINGER**

Mailing Address 1200 CONCORD AVENUE

City State Zip Code  
CONCORD CA 94520-4915

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
BEDINGER AND COMPANY CPA

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
620.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11.943485**

Amount of Each Receipt this Period  
210.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. EDMUND BERGASSI**

Mailing Address 35 PORTMAN ROAD

City State Zip Code  
NEW ROCHELLE NY 10801-2104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
BERGASSI GROUP, LLC MANAGER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
625.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11.943551**

Amount of Each Receipt this Period  
225.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 485.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. ROBERT BLANCH**

Mailing Address 19618 76TH AVE NE

City State Zip Code  
KENMORE WA 98028-2070

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
BOEING PAINTER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11.943535**

Amount of Each Receipt this Period  
80.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. DOUGLAS BOVEE**

Mailing Address 26913 DIAMONDHEAD LANE

City State Zip Code  
RANCHO PALOS VERDES CA 90275-3726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11.943500**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. DAN J. BROWN**

Mailing Address 6318 WOODMAN DRIVE

City State Zip Code  
OROVILLE CA 95966-3844

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11.943517**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 230.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. MICHAEL CIOS**

Mailing Address **625 WEST HUNTINGTON COMMONS ROAD**

City State Zip Code  
**MOUNT PROSPECT IL 60056-5252**

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:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**09 / 30 / 2014**

**Transaction ID : SA11.943360**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. ANN M. COLLICA**

Mailing Address **304 STALLION PLACE**

City State Zip Code  
**BONITA CA 91902-2321**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**INFORMATION REQUESTED PER BEST EFFORTS** **INFORMATION REQUESTED PER BEST EFF**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**09 / 30 / 2014**

**Transaction ID : SA11.943405**

Amount of Each Receipt this Period  
**160.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. JAMES W. DOTINGA**

Mailing Address **4026 SALT SPRING DRIVE**

City State Zip Code  
**FERNDALE WA 98248-9538**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**SELF EMPLOYED** **APARTMENT MANAGER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**342.00**

Date of Receipt  
**09 / 30 / 2014**

**Transaction ID : SA11.943493**

Amount of Each Receipt this Period  
**42.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **302.00**

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. ALBERT L. EVANS JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 695 RIDGE ROAD  
 City ORWIGSBURG State PA Zip Code 17961-2219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2014  
**Transaction ID : SA11.943426**  
 Amount of Each Receipt this Period 500.00  
 CONTRIBUTION

**B. DONALD FRAHM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 AVENUE DE LA MER APT 1006  
 City PALM COAST State FL Zip Code 32137-1208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 30 / 2014  
**Transaction ID : SA11.943619**  
 Amount of Each Receipt this Period 400.00  
 CONTRIBUTION

**C. JEFFREY G. FRANK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5880 SCENIC DRIVE  
 City WEST BEND State WI Zip Code 53095-4412  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED PER BEST EFF( Occupation INFORMATION REQUESTED PER BEST EFF(
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 09 / 30 / 2014  
**Transaction ID : SA11.943446**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 1000.00  
**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. MARK GALLISON**

Mailing Address 1212 SYCAMORE STREET

City State Zip Code  
TURLOCK CA 95380-4147

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11.943534**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MARK GALLISON**

Mailing Address 1212 SYCAMORE STREET

City State Zip Code  
TURLOCK CA 95380-4147

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11.943645**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. HARRY GRISWOLD**

Mailing Address P.O. BOX 885

City State Zip Code  
WEST SALEM WI 54669-0885

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF EMPLOYED ATTORNEY

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11.944146**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 350.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. CARL GROEPLER**

Mailing Address 157 RITCHIE DRIVE

City State Zip Code  
YONKERS NY 10705-4516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11.943526**

Amount of Each Receipt this Period  
150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. HERBERT HOLMES**

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11.943388**

Amount of Each Receipt this Period  
300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. GLADYS R. HUBER**

Mailing Address 707 WEST PIONEER RD

City State Zip Code  
MEQUON WI 53097-1732

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11.943594**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
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Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. MR. FRANK KEARNY III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 103 LIMEKILN DRIVE  
 City NEENAH State WI Zip Code 54956-4213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 30 / 2014  
**Transaction ID : SA11.943607**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**B. MAHLON KIRK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 729 MORNINGSTAR DRIVE APT 2  
 City PORTAGE State WI Zip Code 53901-3418  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 09 / 30 / 2014  
**Transaction ID : SA11.943482**  
 Amount of Each Receipt this Period 50.00  
 CONTRIBUTION

**C. LOU KRIKELAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 407 E MADISON ST  
 City DODGEVILLE State WI Zip Code 53533-1293  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LAND'S END Occupation SYSTEMS ANALYST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2014  
**Transaction ID : SA11.943941**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 197 OF 323
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. KARL J. LYONS</b>		Date of Receipt
Mailing Address 4438 CHERRY OAK LANE		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City State Zip Code HOUSTON TX 77088-7212		<b>Transaction ID : SA11.943537</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer Occupation FORGED COMPONENTS INC OWNER/PRESIDENT		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="320.00"/>

Full Name (Last, First, Middle Initial) <b>B. MALCOLM MCCULLOUGH</b>		Date of Receipt
Mailing Address 51 LAWRENCE AVE		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City State Zip Code MALVERNE NY 11565-1406		<b>Transaction ID : SA11.944074</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer Occupation NYS OMH PSYCHOLOGIST		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>

Full Name (Last, First, Middle Initial) <b>C. JOHN D. MCLEOD</b>		Date of Receipt
Mailing Address 111 BORDER LEE FARM		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City State Zip Code CAMERON NC 28326-7043		<b>Transaction ID : SA11.943503</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="115.00"/>
Name of Employer Occupation MCLEOD AUTO CRUSHING SELF EMPLOYED		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="510.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="315.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 198 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. JEAN MICHAELS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2181 FREYDALE ROAD SE  
 City MARIETTA State GA Zip Code 30067-7017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 09 / 30 / 2014  
**Transaction ID : SA11.943533**  
 Amount of Each Receipt this Period  
 255.00  
 CONTRIBUTION

**B. CLAYTON J. MORGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 38026 SHERWOOD STREET  
 City WESTLAND State MI Zip Code 48185-3744  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 09 / 30 / 2014  
**Transaction ID : SA11.943542**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

**C. JOHN A. PAGIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 104 WAYNE STREET  
 City HOWE State IN Zip Code 46746-9788  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 09 / 30 / 2014  
**Transaction ID : SA11.943613**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 505.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 199 OF 323
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. FRED D. PANZER**  
Full Name (Last, First, Middle Initial)

Mailing Address W6375 FIRELANE 8

City MENASHA State WI Zip Code 54952-9746

FEC ID number of contributing federal political committee. **C**

Name of Employer RADIOLOGY ASSOCIATION OF APPLETON Occupation M.D.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 30 / 2014  
**Transaction ID : SA11.943321**

Amount of Each Receipt this Period 400.00

CONTRIBUTION

**B. ROBERT PAWLAK**  
Full Name (Last, First, Middle Initial)

Mailing Address 12645 W HICKORY ROAD

City NEW BERLIN State WI Zip Code 53151-4622

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 09 / 30 / 2014  
**Transaction ID : SA11.943654**

Amount of Each Receipt this Period 60.00

CONTRIBUTION

**C. DONALD J. PENNIALL**  
Full Name (Last, First, Middle Initial)

Mailing Address 1413 8TH STREET

City CORONADO State CA Zip Code 92118-2202

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 09 / 30 / 2014  
**Transaction ID : SA11.943338**

Amount of Each Receipt this Period 100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 560.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 200 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. TANNIRU RAO**

Mailing Address **2655 N MAYFAIR ROAD**

City **MILWAUKEE**      State **WI**      Zip Code **53226-1302**

FEC ID number of contributing federal political committee.      **C**

Name of Employer: **SELF EMPLOYED**      Occupation: **SELF EMPLOYED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1100.00**

Date of Receipt  
**09 / 30 / 2014**

**Transaction ID : SA11.943608**

Amount of Each Receipt this Period  
**500.00**

**CONTRIBUTION**

Full Name (Last, First, Middle Initial)  
**B. MARGARET M. RENDALL**

Mailing Address **6710 BRAUN ROAD**

City **RACINE**      State **WI**      Zip Code **53403-9414**

FEC ID number of contributing federal political committee.      **C**

Name of Employer: **RETIRED**      Occupation: **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**400.00**

Date of Receipt  
**09 / 30 / 2014**

**Transaction ID : SA11.943591**

Amount of Each Receipt this Period  
**75.00**

**CONTRIBUTION**

Full Name (Last, First, Middle Initial)  
**C. RICHARD K. REULING**

Mailing Address **1971 VIA DEL PICAMADEROS**

City **GREEN VALLEY**      State **AZ**      Zip Code **85622-5413**

FEC ID number of contributing federal political committee.      **C**

Name of Employer: **RETIRED**      Occupation: **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt  
**09 / 30 / 2014**

**Transaction ID : SA11.943612**

Amount of Each Receipt this Period  
**100.00**

**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ► **675.00**

**TOTAL** This Period (last page this line number only)..... ►



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 201 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. MELVIN A. RIES**

Mailing Address 3585 ROUND BARN BOULEVARD APT 329

City State Zip Code  
SANTA ROSA CA 95403-0145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
355.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2014  
**Transaction ID : SA11.943491**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MELVIN A. RIES**

Mailing Address 3585 ROUND BARN BOULEVARD APT 329

City State Zip Code  
SANTA ROSA CA 95403-0145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
355.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2014  
**Transaction ID : SA11.944095**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MARY M. SCHICK**

Mailing Address 3100 SOUT LAUREL DRIVE

City State Zip Code  
NEW BERLIN WI 53151-4220

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:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2014  
**Transaction ID : SA11.943291**

Amount of Each Receipt this Period  
45.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 145.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 202 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. JOAN M. SCHNETTLER**

Mailing Address **2576 TOUCHMARK COURT**

City **APPLETON** State **WI** Zip Code **54914-8792**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11.944149**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. ALVIN P. SIEG**

Mailing Address **2839 6TH STREET**

City **EAU CLAIRE** State **WI** Zip Code **54703-2898**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11.943449**

Amount of Each Receipt this Period  
**10.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. WILLIAM T. SMITH**

Mailing Address **861 ALAMEDA DRIVE**

City **HUNTINGTOWN** State **MD** Zip Code **20639-9510**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11.943371**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **210.00**

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 203 OF 323
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. ROY THOMPSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 4208 NORTH 27TH STREET

City TACOMA	State WA	Zip Code 98407-5217
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
410.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

**Transaction ID : SA11.943492**

Amount of Each Receipt this Period  

90.00
-------

**CONTRIBUTION**

**B. BETTY WAITE**  
Full Name (Last, First, Middle Initial)

Mailing Address 12 PLEASANT STREET

City BURLINGTON	State MA	Zip Code 01803-2727
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

**Transaction ID : SA11.943529**

Amount of Each Receipt this Period  

35.00
-------

**CONTRIBUTION**

**C. LARRY WALSH**  
Full Name (Last, First, Middle Initial)

Mailing Address 2321 SAINT ANTHONYS PLACE

City SIOUX CITY	State IA	Zip Code 51108-3602
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

**Transaction ID : SA11.943520**

Amount of Each Receipt this Period  

100.00
--------

**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 204 OF 323  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**ALICE M. WHITMORE**

Mailing Address **798 FAIRWAY DRIVE**

City **MOSINEE** State **WI** Zip Code **54455-8278**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
**09 / 30 / 2014**

**Transaction ID : SA11.943741**

Amount of Each Receipt this Period  
**100.00**

**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) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**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) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>168360.53</b>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 205 OF 323  
(check only one)

<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	---	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. REPUBLICAN PARTY OF PORTAGE COUNTY**

Mailing Address **PO BOX 590**

City **STEVENS POINT** State **WI** Zip Code **54481-0590**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt  
**09 / 22 / 2014**

**Transaction ID : SA11.948280**

Amount of Each Receipt this Period  
**300.00**

**CONTRIBUTION**

Full Name (Last, First, Middle Initial)  
**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>300.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>300.00</b>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 206 OF 323
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. US VENTURE US PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 425 BETTER WAY  
 City APPLETON State WI Zip Code 54915-6192  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 04 / 2014  
**Transaction ID : SA11.936906**  
 Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

**B. JOHNSON & JOHNSON FEDERAL PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 JOHNSON & JOHNSON PLAZA  
 City NEW BRUNSWICK State NJ Zip Code 08933-0001  
 FEC ID number of contributing federal political committee. **C** C00010983  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2014  
**Transaction ID : SA11.948282**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**C. THRIVENT FINANCIAL FOR LUTHERANS EMPLOYEE PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address POST OFFICE BOX 1892  
 City APPLETON State WI Zip Code 54912-1892  
 FEC ID number of contributing federal political committee. **C** C00121319  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2014  
**Transaction ID : SA11.948281**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 207 OF 323
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. COPART INC. PAC</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 22 / 2014 <b>Transaction ID : SA11.948279</b>
Mailing Address 4665 BUSINESS CENTER DRIVE		Amount of Each Receipt this Period 2500.00
City FAIRFIELD	State CA	Zip Code 94534-
FEC ID number of contributing federal political committee. C C00452581	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>B. PEPSICO CONCERNED CITIZENS FUND PAC FED</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 22 / 2014 <b>Transaction ID : SA11.948278</b>
Mailing Address 700 ANDERSON HILL RD		Amount of Each Receipt this Period 2500.00
City PURCHASE	State NY	Zip Code 10577-1401
FEC ID number of contributing federal political committee. C C00039321	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>C. NEXTERA ENERGY PAC</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 26 / 2014 <b>Transaction ID : SA11.948276</b>
Mailing Address 700 UNIVERSE BLVD		Amount of Each Receipt this Period 2500.00
City JUNO BEACH	State FL	Zip Code 33408-2657
FEC ID number of contributing federal political committee. C C00064774	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 208 OF 323
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. NEXTERA ENERGY PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 700 UNIVERSE BLVD  
City JUNO BEACH State FL Zip Code 33408-2657  
FEC ID number of contributing federal political committee. **C** C00064774  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 09 / 26 / 2014  
**Transaction ID : SA11.948277**  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION

**B. STRATEGY PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3048 SHOREWOOD DRIVE  
City OSHKOSH State WI Zip Code 54901-  
FEC ID number of contributing federal political committee. **C** C00497842  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 30 / 2014  
**Transaction ID : SA11.948283**  
Amount of Each Receipt this Period 5000.00  
CONTRIBUTION

**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) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	20500.00



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 209 OF 323
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. REPUBLICAN NATIONAL COMMITTEE</b>		Date of Receipt MM / DD / YYYY 09 / 02 / 2014 <b>Transaction ID : SA11.948284</b>
Mailing Address 310 1ST ST SE		Amount of Each Receipt this Period 80550.00
City WASHINGTON	State DC	Zip Code 20003-1885
FEC ID number of contributing federal political committee. C C00003418	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 633500.00	
		TRANSFER

Full Name (Last, First, Middle Initial) <b>B. REPUBLICAN NATIONAL COMMITTEE</b>		Date of Receipt MM / DD / YYYY 09 / 30 / 2014 <b>Transaction ID : SA11.948285</b>
Mailing Address 310 1ST ST SE		Amount of Each Receipt this Period 80550.00
City WASHINGTON	State DC	Zip Code 20003-1885
FEC ID number of contributing federal political committee. C C00003418	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 633500.00	
		TRANSFER

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	161100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	161100.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 210 OF 323  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. REPUBLICAN PARTY OF SAUK COUNTY**

Mailing Address **S8261 KASSNER ROAD**

City State Zip Code  
**MERRIMAC WI 53561-**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**800.00**

Date of Receipt  
 /  /   
**09 / 04 / 2014**

**Transaction ID : SA11.936905**

Amount of Each Receipt this Period  
 **800.00**

REFUND

Full Name (Last, First, Middle Initial)  
**B. DOUGLAS COUNTY REPUBLICAN PARTY**

Mailing Address **P.O. BOX 1555**

City State Zip Code  
**SUPERIOR WI 54880-0417**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**600.00**

Date of Receipt  
 /  /   
**09 / 11 / 2014**

**Transaction ID : SA11.946749**

Amount of Each Receipt this Period  
 **200.00**

REFUND

Full Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>1000.00</b>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. BENJAMIN PLUMBING INC.**

Mailing Address 5396 KING JAMES WAY

City MADISON State WI Zip Code 53719

Purpose of Disbursement  
CUSTODIAL SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 02 / 2014

Transaction ID : SB21B.I20435

Amount of Each Disbursement this Period

319.05

Full Name (Last, First, Middle Initial)

**B. CAMPAIGN NOW**

Mailing Address 1126 S 70TH ST

City MILWAUKEE State WI Zip Code 53214

Purpose of Disbursement  
EMAIL SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 02 / 2014

Transaction ID : SB21B.I20448

Amount of Each Disbursement this Period

9121.96

Full Name (Last, First, Middle Initial)

**C. CITY TREASURER - WATER/SEWER**

Mailing Address P.O. BOX 2997

City MADISON State WI Zip Code 53701

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 02 / 2014

Transaction ID : SB21B.I20515

Amount of Each Disbursement this Period

445.38

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

9886.39

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. COCA COLA ENTERPRISES**

Mailing Address 2335 PAYSHERE CIRCLE

City State Zip Code  
CHICAGO IL 60674

Purpose of Disbursement  
OFFICE SODA

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 02 / 2014

Transaction ID : SB21B.I20483

Amount of Each Disbursement this Period

21.10

Full Name (Last, First, Middle Initial)

**B. FED EX**

Mailing Address P.O. BOX 94515

City State Zip Code  
PALATINE IL 60094

Purpose of Disbursement  
SHIPPING EXPENSE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 02 / 2014

Transaction ID : SB21B.I20512

Amount of Each Disbursement this Period

17.40

Full Name (Last, First, Middle Initial)

**C. HILL ELECTRIC**

Mailing Address 1513 EMIL STREET

City State Zip Code  
MADISON WI 53713

Purpose of Disbursement  
OFFICE MAINTENANCE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 02 / 2014

Transaction ID : SB21B.I20462

Amount of Each Disbursement this Period

286.50

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

325.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. IMPACT ACQUISITIONS, LLC**

Mailing Address 75 REMITTANCE DRIVE

City CHICAGO State IL Zip Code 60675

Purpose of Disbursement  
COPIER LEASE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2014

Transaction ID : **SB21B.I20389**

Amount of Each Disbursement this Period

2589.06

Full Name (Last, First, Middle Initial)

**B. LA CROSSE DEPOT**

Mailing Address P.O. BOX 1283

City LA CROSSE State WI Zip Code 54602

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2014

Transaction ID : **SB21B.I20516**

Amount of Each Disbursement this Period

264.98

Full Name (Last, First, Middle Initial)

**C. MG&E**

Mailing Address P.O. BOX 1231

City MADISON State WI Zip Code 53701-1231

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2014

Transaction ID : **SB21B.I20518**

Amount of Each Disbursement this Period

1040.70

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3894.74

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. MICROAGE**

Mailing Address P.O. BOX 2941

City PHOENIX State AZ Zip Code 85062

Purpose of Disbursement  
OFFICE EQUIPMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 02 / 2014

Transaction ID : SB21B.I20461

Amount of Each Disbursement this Period

3093.24

Full Name (Last, First, Middle Initial)

**B. MILLS ENTERPRISES, LLC**

Mailing Address 4015 80TH STREET

City KENOSHA State WI Zip Code 53142

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 02 / 2014

Transaction ID : SB21B.I20519

Amount of Each Disbursement this Period

621.40

Full Name (Last, First, Middle Initial)

**C. ONLINE SERVICES, LLC**

Mailing Address 21520 W GREENFIELD AVENUE

City NEW BERLIN State WI Zip Code 53146

Purpose of Disbursement  
CLOTHING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 02 / 2014

Transaction ID : SB21B.I20385

Amount of Each Disbursement this Period

7627.51

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

11342.15

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2014

**Transaction ID : SB21B.I20396**

Amount of Each Disbursement this Period

29.00

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2014

**Transaction ID : SB21B.I20397**

Amount of Each Disbursement this Period

29.00

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2014

**Transaction ID : SB21B.I20398**

Amount of Each Disbursement this Period

29.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

87.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2014

Transaction ID : **SB21B.I20429**

Amount of Each Disbursement this Period

461.81

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2014

Transaction ID : **SB21B.I20430**

Amount of Each Disbursement this Period

423.22

Full Name (Last, First, Middle Initial)

**C. PRO ONE JANITORIAL, INC.**

Mailing Address 1101 ASHWAUBENON ST.

City State Zip Code  
GREEN BAY WI 54304

Purpose of Disbursement  
CUSTODIAL SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2014

Transaction ID : **SB21B.I20436**

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1385.03



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. SPRINT**

Mailing Address P.O. BOX 4181

City State Zip Code  
CAROL STREAM IL 60197

Purpose of Disbursement  
CELL PHONES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M  M  /  D  D  /  Y  Y  Y  Y  
09 02 2014

Transaction ID : SB21B.I20382

Amount of Each Disbursement this Period

52.54

Full Name (Last, First, Middle Initial)

**B. SPRINT**

Mailing Address P.O. BOX 4181

City State Zip Code  
CAROL STREAM IL 60197

Purpose of Disbursement  
CELL PHONES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M  M  /  D  D  /  Y  Y  Y  Y  
09 02 2014

Transaction ID : SB21B.I20383

Amount of Each Disbursement this Period

1134.96

Full Name (Last, First, Middle Initial)

**C. TDS - MADISON 5590**

Mailing Address P.O. BOX 94510

City State Zip Code  
PALATINE IL 60094

Purpose of Disbursement  
OFFICE PHONES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M  M  /  D  D  /  Y  Y  Y  Y  
09 02 2014

Transaction ID : SB21B.I20463

Amount of Each Disbursement this Period

346.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1533.50

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. TDS METROCOM**

Mailing Address P.O. BOX 94510

City PALATINE State IL Zip Code 60094

Purpose of Disbursement  
OFFICE PHONES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2014

Transaction ID : SB21B.I20465

Amount of Each Disbursement this Period

1280.14

Full Name (Last, First, Middle Initial)

**B. WE ENERGIES**

Mailing Address 231 W MICHIGAN STREET

City MILWAUKEE State WI Zip Code 53203-2918

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2014

Transaction ID : SB21B.I20521

Amount of Each Disbursement this Period

262.42

Full Name (Last, First, Middle Initial)

**C. WISCONSIN PUBLIC SERVICE CORPORATION**

Mailing Address P.O. BOX 19003

City GREEN BAY State WI Zip Code 54307

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2014

Transaction ID : SB21B.I20522

Amount of Each Disbursement this Period

177.26

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1719.82

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. XCEL ENERGY**

Mailing Address P.O. BOX 9477

City MINNEAPOLIS State MN Zip Code 55484

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2014

Transaction ID : **SB21B.I20523**

Amount of Each Disbursement this Period

476.90

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

Transaction ID : **SB21B.I20432**

Amount of Each Disbursement this Period

586.51

Full Name (Last, First, Middle Initial)

**C. US POSTMASTER**

Mailing Address

City State Zip Code

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

Transaction ID : **SB21B.I20504**

Amount of Each Disbursement this Period

245.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1308.41

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. ISTREAM**

Mailing Address 13555 BISHOPS CT, STE 102

City State Zip Code  
BROOKFIELD WI 53005

Purpose of Disbursement  
CHECK PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 04 / 2014

Transaction ID : SB21B.I20384

Amount of Each Disbursement this Period

671.65

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 04 / 2014

Transaction ID : SB21B.I20395

Amount of Each Disbursement this Period

11.42

Full Name (Last, First, Middle Initial)

**C. SOUTHWEST PUBLISHING & MAILING CORP**

Mailing Address 4000 SE ADAMS STREET

City State Zip Code  
TOPEKA KS 66609

Purpose of Disbursement  
DIRECT MAIL - NOT FEA

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 04 / 2014

Transaction ID : SB21B.I20441

Amount of Each Disbursement this Period

2528.10

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3211.17

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. AMERICAN LIBERTY GROUP**

Mailing Address 611 PENNSYLVANIA AVENUE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
FUNDRAISING - NOT FEA

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

Transaction ID : SB21B.I20454

Amount of Each Disbursement this Period

31788.57

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

Transaction ID : SB21B.I20399

Amount of Each Disbursement this Period

29.00

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

Transaction ID : SB21B.I20400

Amount of Each Disbursement this Period

29.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

31846.57

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

**Transaction ID : SB21B.I20424**

Amount of Each Disbursement this Period

259.37

Full Name (Last, First, Middle Initial)

**B. PUSH DIGITAL**

Mailing Address P.O. BOX 7431

City State Zip Code  
COLUMBIA SC 29202

Purpose of Disbursement  
EMAIL SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

**Transaction ID : SB21B.I20450**

Amount of Each Disbursement this Period

7555.88

Full Name (Last, First, Middle Initial)

**C. THE TARRANCE GROUP, INC.**

Mailing Address 201 NORTH UNION STREET

City State Zip Code  
ALEXANDRIA VA 22314-2649

Purpose of Disbursement  
POLLING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

**Transaction ID : SB21B.I20503**

Amount of Each Disbursement this Period

40305.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

48120.25

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. WISCONSIN ECONOMIC DEVELOPMENT CORPORATIO**

Mailing Address 201 W WASHINGTON AVENUE

City MADISON State WI Zip Code 53701

Purpose of Disbursement  
OPEN RECORDS REQUEST

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

Transaction ID : SB21B.I20494

Amount of Each Disbursement this Period

191.75

Full Name (Last, First, Middle Initial)

**B. ARENA COMMUNICATIONS**

Mailing Address 1780 W SEQUOIA VISTA CIRCLE

City SALT LAKE CITY State UT Zip Code 84104

Purpose of Disbursement  
PRINTING-NOT FEA

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2014

Transaction ID : SB21B.I20509

Amount of Each Disbursement this Period

96266.00

Full Name (Last, First, Middle Initial)

**C. CHARTER COMM**

Mailing Address P.O. BOX 2981

City MILWAUKEE State WI Zip Code 53201

Purpose of Disbursement  
CABLE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2014

Transaction ID : SB21B.I20380

Amount of Each Disbursement this Period

375.76

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

96833.51

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. LOMONA LLC**

Mailing Address C/O SARA INVESTMENT REAL ESTATE L

City MADISON State WI Zip Code 53719

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2014

Transaction ID : SB21B.I20517

Amount of Each Disbursement this Period

258.50

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2014

Transaction ID : SB21B.I20401

Amount of Each Disbursement this Period

29.00

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2014

Transaction ID : SB21B.I20402

Amount of Each Disbursement this Period

29.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

316.50



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2014

Transaction ID : SB21B.I20403

Amount of Each Disbursement this Period

29.00

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2014

Transaction ID : SB21B.I20421

Amount of Each Disbursement this Period

189.71

Full Name (Last, First, Middle Initial)

**C. PUBLIC OPINION STRATEGIES, LLC**

Mailing Address 214 N. FAYETTE ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
POLLING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2014

Transaction ID : SB21B.I20501

Amount of Each Disbursement this Period

20500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

20718.71

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. WISC DEPT OF REVENUE - RECORDS REQUEST**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2014

Mailing Address P.O. BOX 8906

**Transaction ID : SB21B.I20510**

City MADISON State WI Zip Code 53708

Amount of Each Disbursement this Period

96.00
-------

Purpose of Disbursement  
SALES/USE TAX

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. WISC DEPT OF REVENUE - RECORDS REQUEST**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2014

Mailing Address P.O. BOX 8906

**Transaction ID : SB21B.I20511**

City MADISON State WI Zip Code 53708

Amount of Each Disbursement this Period

252.00
--------

Purpose of Disbursement  
SALES/USE TAX

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. ASPECT CONSULTING, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2014

Mailing Address 8401 EXCELSIOR DRIVE

**Transaction ID : SB21B.I20386**

City MADISON State WI Zip Code 53717

Amount of Each Disbursement this Period

7211.00
---------

Purpose of Disbursement  
COMPLIANCE CONSULTING

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

7559.00
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**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. LIND WEININGER LLC**

Mailing Address 8020 EXCELSIOR DRIVE #402

City MADISON State WI Zip Code 53717

Purpose of Disbursement  
LEGAL SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 09 / 2014

**Transaction ID : SB21B.I20459**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 09 / 2014

**Transaction ID : SB21B.I20417**

Amount of Each Disbursement this Period

96.70

Full Name (Last, First, Middle Initial)

**C. BANCARD/FIS MERCHANT SERVICES**

Mailing Address 11000 W LAKE PARK DRIVE

City MILWAUKEE State WI Zip Code 53224

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2014

**Transaction ID : SB21B.I20394**

Amount of Each Disbursement this Period

905.92

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2002.62

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 10 / 2014

Transaction ID : SB21B.I20433

Amount of Each Disbursement this Period

1301.53

Full Name (Last, First, Middle Initial)

**B. BMO HARRIS BANK**

Mailing Address 770 N WATER STREET

City State Zip Code  
MILWAUKEE WI 53201

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 11 / 2014

Transaction ID : SB21B.I20376

Amount of Each Disbursement this Period

280.59

Full Name (Last, First, Middle Initial)

**C. MAJORITY STRATEGIES**

Mailing Address 135 PROFESSIONAL DRIVE

City State Zip Code  
PONTE VEDRA BEACH FL 32082

Purpose of Disbursement  
PRINTING-NOT FEA

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 11 / 2014

Transaction ID : SB21B.I20506

Amount of Each Disbursement this Period

2900.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4482.12

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 11 / 2014

**Transaction ID : SB21B.I20404**

Amount of Each Disbursement this Period

29.00

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 11 / 2014

**Transaction ID : SB21B.I20428**

Amount of Each Disbursement this Period

357.25

Full Name (Last, First, Middle Initial)

**C. SCM ASSOCIATES, INC.**

Mailing Address 1283 MAIN STREET

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement  
DIRECT MAIL - NOT FEA

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 11 / 2014

**Transaction ID : SB21B.I20439**

Amount of Each Disbursement this Period

5602.38

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5988.63

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address P.O. BOX 981540

City EL PASO State TX Zip Code 79998

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 12 / 2014

**Transaction ID : SB21B.I20392**

Amount of Each Disbursement this Period

155.24

**B. AMERICAN LIBERTY GROUP**

Full Name (Last, First, Middle Initial)

Mailing Address 611 PENNSYLVANIA AVENUE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
FUNDRAISING - NOT FEA

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 12 / 2014

**Transaction ID : SB21B.I20455**

Amount of Each Disbursement this Period

49183.23

**C. BMO Harris Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 770 N Water Street

City Milwaukee State WI Zip Code 53201

Purpose of Disbursement  
Bank Fee Refund

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 12 / 2014

**Transaction ID : MCW32715B**

Amount of Each Disbursement this Period

-280.59

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

49057.88

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. BMO HARRIS BANK**

Mailing Address 770 N WATER STREET

City MILWAUKEE State WI Zip Code 53201

Purpose of Disbursement  
REFUND OF BANK FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 12 / 2014

Transaction ID : SB21B.I20598

Amount of Each Disbursement this Period

-280.59

Full Name (Last, First, Middle Initial)

**B. CENTURY LINK**

Mailing Address P.O. BOX 4300

City CAROL STREAM State IL Zip Code 60197

Purpose of Disbursement  
INTERNET

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 12 / 2014

Transaction ID : SB21B.I20458

Amount of Each Disbursement this Period

105.08

Full Name (Last, First, Middle Initial)

**C. CHARTER - EAU CLAIRE**

Mailing Address P.O. BOX 2981

City MILWAUKEE State WI Zip Code 53201

Purpose of Disbursement  
CABLE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 12 / 2014

Transaction ID : SB21B.I20377

Amount of Each Disbursement this Period

223.76

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

48.25

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. CHARTER - JANESVILLE**

Mailing Address P.O. BOX 2981

City MILWAUKEE State WI Zip Code 53201

Purpose of Disbursement  
CABLE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 12 / 2014

Transaction ID : **SB21B.I20378**

Amount of Each Disbursement this Period

187.39

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. DAN MORSE CONSULTING LLC**

Mailing Address 5205 BARTON ROAD

City MADISON State WI Zip Code 53711

Purpose of Disbursement  
FUNDRAISING CONSULTANT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 12 / 2014

Transaction ID : **SB21B.I20457**

Amount of Each Disbursement this Period

4000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. DAVID KAYE ENTERPRISES, LLC**

Mailing Address ATTN: AMY HOLTZ

City ROCHESTER State MN Zip Code 55906

Purpose of Disbursement  
OFFICE RENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 12 / 2014

Transaction ID : **SB21B.I20468**

Amount of Each Disbursement this Period

1500.00

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5687.39



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. NGAN LEE**

Mailing Address S4185 WHISPERING PINES DRIVE

City BARABOO State WI Zip Code 53913

Purpose of Disbursement  
OFFICE RENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 12 / 2014

**Transaction ID : SB21B.I20476**

Amount of Each Disbursement this Period

800.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 12 / 2014

**Transaction ID : SB21B.I20427**

Amount of Each Disbursement this Period

333.65

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. RJ JOHNSON & ASSOCIATES, INC**

Mailing Address N7130 NORTH LOST LAKE ROAD

City RANDOLPH State WI Zip Code 53956

Purpose of Disbursement  
POLITICAL CONSULTING: STRATEGY

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 12 / 2014

**Transaction ID : SB21B.I20497**

Amount of Each Disbursement this Period

10000.00

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

11133.65

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. TDS METROCOM**

Mailing Address P.O. BOX 94510

City PALATINE State IL Zip Code 60094

Purpose of Disbursement  
OFFICE PHONES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 12 / 2014

Transaction ID : SB21B.I20464

Amount of Each Disbursement this Period

358.74

Full Name (Last, First, Middle Initial)

**B. TENUTA-DEBARTOLO ENTERPRISES, LLC**

Mailing Address 6040 39TH AVENUE

City KENOSHA State WI Zip Code 53703

Purpose of Disbursement  
OFFICE RENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 12 / 2014

Transaction ID : SB21B.I20480

Amount of Each Disbursement this Period

850.00

Full Name (Last, First, Middle Initial)

**C. TIME WARNER CABLE**

Mailing Address P.O. BOX 3237

City MILWAUKEE State WI Zip Code 53203

Purpose of Disbursement  
CABLE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 12 / 2014

Transaction ID : SB21B.I20381

Amount of Each Disbursement this Period

192.26

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1401.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. BRIDGETREE**

Mailing Address P.O. BOX 601289

City CHARLOTTE State NC Zip Code 28260

Purpose of Disbursement  
DATABASE MANAGEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : SB21B.I20438**

Amount of Each Disbursement this Period

7291.35

Full Name (Last, First, Middle Initial)

**B. CHARTER - MADISON**

Mailing Address P.O. BOX 2981

City MILWAUKEE State WI Zip Code 53201

Purpose of Disbursement  
CABLE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : SB21B.I20379**

Amount of Each Disbursement this Period

220.69

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : SB21B.I20425**

Amount of Each Disbursement this Period

320.66

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7291.35

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. ARENA COMMUNICATIONS**

Mailing Address 1780 W SEQUOIA VISTA CIRCLE

City State Zip Code  
SALT LAKE CITY UT 84104

Purpose of Disbursement  
PRINTING-NOT FEA

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	16	/	2014

Transaction ID : **SB21B.I20508**

Amount of Each Disbursement this Period

95501.00
----------

Full Name (Last, First, Middle Initial)

**B. BMO HARRIS BANK**

Mailing Address 770 N WATER STREET

City State Zip Code  
MILWAUKEE WI 53201

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	16	/	2014

Transaction ID : **SB21B.I20375**

Amount of Each Disbursement this Period

190.59
--------

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	16	/	2014

Transaction ID : **SB21B.I20414**

Amount of Each Disbursement this Period

50.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

95741.59
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**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	1	4

**Transaction ID : SB21B.I20419**

Amount of Each Disbursement this Period

1	6	4	6	5
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. WISCONSIN ECONOMIC DEVELOPMENT CORPORATIO**

Mailing Address 201 W WASHINGTON AVENUE

City State Zip Code  
MADISON WI 53701

Purpose of Disbursement  
OPEN RECORDS REQUEST

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	1	4

**Transaction ID : SB21B.I20492**

Amount of Each Disbursement this Period

1	9	7	5
---	---	---	---

Full Name (Last, First, Middle Initial)

**C. APPLETON WEST END REALTY LLC**

Mailing Address 512 W. COLLEGE AVE

City State Zip Code  
APPLETON WI 54911

Purpose of Disbursement  
OFFICE RENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	4

**Transaction ID : SB21B.I20466**

Amount of Each Disbursement this Period

7	0	0	0
---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

8	8	4	4	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. BMO Harris Bank**

Mailing Address 770 N Water Street

City Milwaukee State WI Zip Code 53201

Purpose of Disbursement  
Bank Fee Refund

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	4

Transaction ID : **MCW032715C**

Amount of Each Disbursement this Period

-	2	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. BMO HARRIS BANK**

Mailing Address 770 N WATER STREET

City MILWAUKEE State WI Zip Code 53201

Purpose of Disbursement  
REFUND OF BANK FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	4

Transaction ID : **SB21B.I20599**

Amount of Each Disbursement this Period

-	2	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. BOULDER VENTURE 26 LLC**

Mailing Address 311 E CHICAGO STREET

City MILWAUKEE State WI Zip Code 53202

Purpose of Disbursement  
OFFICE RENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	4

Transaction ID : **SB21B.I20467**

Amount of Each Disbursement this Period

3	0	0	.	0	0
---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

-	1	0	0	.	0	0
---	---	---	---	---	---	---

**TOTAL** This Period (last page this line number only)..... ▶

-	1	0	0	.	0	0
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. EDGEWOOD PLAZA JOINT VENTURE**

Mailing Address 10400 W INNOVATION DRIVE

City MILWAUKEE State WI Zip Code 53226

Purpose of Disbursement  
OFFICE RENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2014

Transaction ID : SB21B.I20469

Amount of Each Disbursement this Period

1160.94

Full Name (Last, First, Middle Initial)

**B. HILLCREST PROPERTIES LTD.**

Mailing Address 2986 COUNTY ROAD PP

City DEPERE State WI Zip Code 54115

Purpose of Disbursement  
OFFICE RENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2014

Transaction ID : SB21B.I20470

Amount of Each Disbursement this Period

1225.00

Full Name (Last, First, Middle Initial)

**C. JOURNAL BROADCAST GROUP**

Mailing Address 720 E CAPITOL DRIVE

City MILWAUKEE State WI Zip Code 53212

Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2014

Transaction ID : SB21B.I20514

Amount of Each Disbursement this Period

900.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3285.94

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. LA CROSSE DEPOT**

Mailing Address P.O. BOX 1283

City LA CROSSE State WI Zip Code 54602

Purpose of Disbursement  
OFFICE RENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2014

Transaction ID : SB21B.I20471

Amount of Each Disbursement this Period

1200.00

Full Name (Last, First, Middle Initial)

**B. LAPPIN HAYES ASSOCIATES**

Mailing Address C/O OGDEN AND COMPANT, INC

City MILWAUKEE State WI Zip Code 53202

Purpose of Disbursement  
OFFICE RENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2014

Transaction ID : SB21B.I20472

Amount of Each Disbursement this Period

900.00

Full Name (Last, First, Middle Initial)

**C. LOMONA LLC**

Mailing Address C/O SARA INVESTMENT REAL ESTATE L

City MADISON State WI Zip Code 53719

Purpose of Disbursement  
OFFICE RENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2014

Transaction ID : SB21B.I20473

Amount of Each Disbursement this Period

2068.42

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4168.42



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. MAYFAIR OFFICE, LLC**

Mailing Address BIN # 88144

City State Zip Code  
MILWAUKEE WI 53288

Purpose of Disbursement  
OFFICE RENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2014

Transaction ID : SB21B.I20474

Amount of Each Disbursement this Period

800.00

Full Name (Last, First, Middle Initial)

**B. MILLS ENTERPRISES, LLC**

Mailing Address 4015 80TH STREET

City State Zip Code  
KENOSHA WI 53142

Purpose of Disbursement  
OFFICE RENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2014

Transaction ID : SB21B.I20475

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. OUGHTON GROUP, LLC**

Mailing Address 824A S MAIN STREET

City State Zip Code  
FOND DU LAC WI 54935

Purpose of Disbursement  
OFFICE RENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2014

Transaction ID : SB21B.I20477

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2800.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.I20405**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.I20406**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.I20407**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 17 / 2014

Transaction ID : SB21B.I20431

Amount of Each Disbursement this Period

526.48

Full Name (Last, First, Middle Initial)

**B. PRIME CAPITAL, LLC**

Mailing Address P.O. BOX 1573

City State Zip Code  
WAUSAU WI 54402

Purpose of Disbursement  
OFFICE RENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 17 / 2014

Transaction ID : SB21B.I20478

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. RIVER CITY PARTNERS, LLC**

Mailing Address 3033 EXCELSIOR BLVD

City State Zip Code  
MINNEAPOLIS MN 55416

Purpose of Disbursement  
OFFICE RENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 17 / 2014

Transaction ID : SB21B.I20479

Amount of Each Disbursement this Period

1200.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2726.48

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. TOOTH FAIRY LLC**

Mailing Address 79 OAK CREEK TRAIL

City MADISON State WI Zip Code 53717

Purpose of Disbursement  
OFFICE RENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	17	/	2014

Transaction ID : SB21B.I20481

Amount of Each Disbursement this Period

1450.00
---------

Full Name (Last, First, Middle Initial)

**B. WAUKESHA EAST COMMERCE CENTER LLC**

Mailing Address 1703 PEARL STREET

City WAUKESHA State WI Zip Code 53186

Purpose of Disbursement  
OFFICE RENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	17	/	2014

Transaction ID : SB21B.I20482

Amount of Each Disbursement this Period

2070.50
---------

Full Name (Last, First, Middle Initial)

**C. WILAND DIRECT INC.**

Mailing Address P.O. BOX 17361

City DENVER State CO Zip Code 80217

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	17	/	2014

Transaction ID : SB21B.I20460

Amount of Each Disbursement this Period

812.08
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4332.58
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. WISCONSIN CLUB**

Mailing Address 900 W. WISCONSIN AVENUE

City MILWAUKEE State WI Zip Code 53233

Purpose of Disbursement  
EVENT CATERING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2014

Transaction ID : SB21B.I20451

Amount of Each Disbursement this Period

402.86

Full Name (Last, First, Middle Initial)

**B. WISCONSIN ECONOMIC DEVELOPMENT CORPORATIO**

Mailing Address 201 W WASHINGTON AVENUE

City MADISON State WI Zip Code 53701

Purpose of Disbursement  
OPEN RECORDS REQUEST

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2014

Transaction ID : SB21B.I20493

Amount of Each Disbursement this Period

85.75

Full Name (Last, First, Middle Initial)

**C. BANCARD/FIS MERCHANT SERVICES**

Mailing Address 11000 W LAKE PARK DRIVE

City MILWAUKEE State WI Zip Code 53224

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 18 / 2014

Transaction ID : SB21B.I20393

Amount of Each Disbursement this Period

25.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

513.61

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN NOW**

Mailing Address 1126 S 70TH ST

City MILWAUKEE State WI Zip Code 53214

Purpose of Disbursement  
EMAIL SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB21B.I20447

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB21B.I20408

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB21B.I20409

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 18 / 2014

Transaction ID : SB21B.I20420

Amount of Each Disbursement this Period

185.31

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. ADVANTAGE DIRECT**

Mailing Address 2300 CLARENDON BOULEVARD

City State Zip Code  
ARLINGTON VA 22201

Purpose of Disbursement  
AUTO CALLS

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 19 / 2014

Transaction ID : SB21B.I20371

Amount of Each Disbursement this Period

247.78

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. AMERICAN LIBERTY GROUP**

Mailing Address 611 PENNSYLVANIA AVENUE SE

City State Zip Code  
WASHINGTON DC 20003

Purpose of Disbursement  
FUNDRAISING - NOT FEA

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 19 / 2014

Transaction ID : SB21B.I20453

Amount of Each Disbursement this Period

31429.99

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

31863.08

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 19 / 2014

**Transaction ID : SB21B.I20413**

Amount of Each Disbursement this Period

38.33

Full Name (Last, First, Middle Initial)

**B. SOUTHWEST PUBLISHING & MAILING CORP**

Mailing Address 4000 SE ADAMS STREET

City State Zip Code  
TOPEKA KS 66609

Purpose of Disbursement  
DIRECT MAIL - NOT FEA

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 19 / 2014

**Transaction ID : SB21B.I20443**

Amount of Each Disbursement this Period

9710.45

Full Name (Last, First, Middle Initial)

**C. STEVE BROWN FL**

Mailing Address 3864 W MILLERS BRIDGE ROAD

City State Zip Code  
TALLAHASSEE FL 32312

Purpose of Disbursement  
DIRECT MAIL - NOT FEA

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 19 / 2014

**Transaction ID : SB21B.I20445**

Amount of Each Disbursement this Period

5036.24

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

14785.02



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 22 / 2014

Transaction ID : SB21B.I20410

Amount of Each Disbursement this Period

29.00

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 22 / 2014

Transaction ID : SB21B.I20426

Amount of Each Disbursement this Period

330.70

Full Name (Last, First, Middle Initial)

**C. PUBLIC OPINION STRATEGIES, LLC**

Mailing Address 214 N. FAYETTE ST.

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Disbursement  
POLLING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 22 / 2014

Transaction ID : SB21B.I20498

Amount of Each Disbursement this Period

10500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

10859.70

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. STEVE BROWN FL**

Mailing Address 3864 W MILLERS BRIDGE ROAD

City TALLAHASSEE State FL Zip Code 32312

Purpose of Disbursement  
DIRECT MAIL - NOT FEA

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 22 / 2014

Transaction ID : SB21B.I20446

Amount of Each Disbursement this Period

7869.12

Full Name (Last, First, Middle Initial)

**B. THE TARRANCE GROUP, INC.**

Mailing Address 201 NORTH UNION STREET

City ALEXANDRIA State VA Zip Code 22314-2649

Purpose of Disbursement  
POLLING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 22 / 2014

Transaction ID : SB21B.I20502

Amount of Each Disbursement this Period

14135.00

Full Name (Last, First, Middle Initial)

**C. ADVANTAGE DIRECT**

Mailing Address 2300 CLARENDON BOULEVARD

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
AUTO CALLS

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2014

Transaction ID : SB21B.I20373

Amount of Each Disbursement this Period

4667.76

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

26671.88

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2014

**Transaction ID : SB21B.I20418**

Amount of Each Disbursement this Period

122.21

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 24 / 2014

**Transaction ID : SB21B.I20422**

Amount of Each Disbursement this Period

193.33

Full Name (Last, First, Middle Initial)

**C. SOUTHWEST PUBLISHING & MAILING CORP**

Mailing Address 4000 SE ADAMS STREET

City State Zip Code  
TOPEKA KS 66609

Purpose of Disbursement  
DIRECT MAIL - NOT FEA

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 24 / 2014

**Transaction ID : SB21B.I20442**

Amount of Each Disbursement this Period

4366.86

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4682.40

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. STEVE BROWN FL**

Mailing Address 3864 W MILLERS BRIDGE ROAD

City TALLAHASSEE State FL Zip Code 32312

Purpose of Disbursement  
DIRECT MAIL - NOT FEA

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 24 / 2014

Transaction ID : SB21B.I20444

Amount of Each Disbursement this Period

1647.80

**B. ADVANTAGE DIRECT**

Mailing Address 2300 CLARENDON BOULEVARD

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
AUTO CALLS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 25 / 2014

Transaction ID : SB21B.I20374

Amount of Each Disbursement this Period

26920.39

**C. AMERICAN LIBERTY GROUP**

Mailing Address 611 PENNSYLVANIA AVENUE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
FUNDRAISING - NOT FEA

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 25 / 2014

Transaction ID : SB21B.I20452

Amount of Each Disbursement this Period

18401.60

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

46969.79

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. COCA COLA ENTERPRISES**

Mailing Address 2335 PAYSHERE CIRCLE

City State Zip Code  
CHICAGO IL 60674

Purpose of Disbursement  
OFFICE SODA

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 25 / 2014

Transaction ID : SB21B.I20484

Amount of Each Disbursement this Period

21.10

Full Name (Last, First, Middle Initial)

**B. FED EX**

Mailing Address P.O. BOX 94515

City State Zip Code  
PALATINE IL 60094

Purpose of Disbursement  
SHIPPING EXPENSE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 25 / 2014

Transaction ID : SB21B.I20513

Amount of Each Disbursement this Period

54.43

Full Name (Last, First, Middle Initial)

**C. FLS CONNECT**

Mailing Address 7300 HUDSON BLVD, SUITE 270

City State Zip Code  
ST. PAUL MN 55128-7143

Purpose of Disbursement  
CONFERENCE CALLS

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 25 / 2014

Transaction ID : SB21B.I20388

Amount of Each Disbursement this Period

33.13

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

108.66

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. NONBOX**

Mailing Address 5307 S 92ND ST

City State Zip Code  
HALES CORNERS WI 53130

Purpose of Disbursement  
ADVERTISING EXPENSE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 25 / 2014

Transaction ID : SB21B.I20524

Amount of Each Disbursement this Period

3619.05

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 25 / 2014

Transaction ID : SB21B.I20423

Amount of Each Disbursement this Period

211.27

Full Name (Last, First, Middle Initial)

**C. PRO ONE JANITORIAL, INC.**

Mailing Address 1101 ASHWAUBENON ST.

City State Zip Code  
GREEN BAY WI 54304

Purpose of Disbursement  
CUSTODIAL SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 25 / 2014

Transaction ID : SB21B.I20437

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4330.32

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. PUSH DIGITAL**

Mailing Address P.O. BOX 7431

City COLUMBIA State SC Zip Code 29202

Purpose of Disbursement  
EMAIL SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 25 / 2014

Transaction ID : SB21B.I20449

Amount of Each Disbursement this Period

5766.34

Full Name (Last, First, Middle Initial)

**B. SHADOW FAX**

Mailing Address 4601 HELFESEN DR

City MADISON State WI Zip Code 53718

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 25 / 2014

Transaction ID : SB21B.I20485

Amount of Each Disbursement this Period

79.13

Full Name (Last, First, Middle Initial)

**C. STRATEGIC FUNDRAISING**

Mailing Address 2625 MOMENTUM PLACE

City CHICAGO State IL Zip Code 60689

Purpose of Disbursement  
FUNDRAISING - NOT FEA

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 25 / 2014

Transaction ID : SB21B.I20456

Amount of Each Disbursement this Period

10976.40

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

16821.87

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. VILLAGE GRAPHICS PRINTING, LLC**

Mailing Address 108 W CAPITOL DRIVE

City HARTLAND State WI Zip Code 53029

Purpose of Disbursement  
PRINTING-NOT FEA

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	25	/	2014

Transaction ID : **SB21B.I20507**

Amount of Each Disbursement this Period

466.33
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Full Name (Last, First, Middle Initial)

**B. BMO HARRIS BANK NA 4587**

Mailing Address P.O. BOX 84047

City COLUMBUS State GA Zip Code 31908

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	26	/	2014

Transaction ID : **SB21B.I20390**

Amount of Each Disbursement this Period

1367.46
---------

Full Name (Last, First, Middle Initial)

**C. BMO HARRIS BANK**

Mailing Address 770 N WATER STREET

City MILWAUKEE State WI Zip Code 53201

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2014

Transaction ID : **SB21B.I20538**

Amount of Each Disbursement this Period

158.13
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**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1833.79
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. BMO HARRIS BANK**

Mailing Address 770 N WATER STREET

City MILWAUKEE State WI Zip Code 53201

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	4

Transaction ID : SB21B.I20539

Amount of Each Disbursement this Period

3	9	.	0	0
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. BROCACH IRISH PUB**

Mailing Address 7 W MAIN ST

City MADISON State WI Zip Code 53703-3305

Purpose of Disbursement  
STAFF LUNCHES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	1	4

Transaction ID : SB21B.I20527

Amount of Each Disbursement this Period

9	7	.	0	7
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. DOMAIN/HOSTING SERVICES**

Mailing Address 14455 N HAYDEN ROAD  
SUITE 219

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement  
WEBSITE HOSTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	1	4

Transaction ID : SB21B.I20530

Amount of Each Disbursement this Period

7	9	.	9	9
---	---	---	---	---

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0	0	.	0	0
---	---	---	---	---

0	0	.	0	0
---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. GLASS NICKEL PIZZA**

Mailing Address 2916 ATWOOD AVENUE

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
STAFF LUNCHES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
08 / 12 / 2014

Transaction ID : SB21B.I20532

Amount of Each Disbursement this Period

146.91

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. GLASS NICKEL PIZZA**

Mailing Address 2916 ATWOOD AVENUE

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
STAFF LUNCHES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
08 / 21 / 2014

Transaction ID : SB21B.I20533

Amount of Each Disbursement this Period

66.55

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. HAMPTON INN HOTEL**

Mailing Address 615 S 24TH AVENUE

City WAUSAU State WI Zip Code 54401

Purpose of Disbursement  
STAFF LODGING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
08 / 17 / 2014

Transaction ID : SB21B.I20534

Amount of Each Disbursement this Period

146.42

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. VERTICAL RESPONSE**

Mailing Address 50 BEALE STREET

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
WEBSITE MAINTENANCE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	4		

Transaction ID : **SB21B.I20536**

Amount of Each Disbursement this Period

4	9	9	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. WALL STREET JOURNAL**

Mailing Address 1211 AVENUE OF THE AMERICAS

City State Zip Code  
NEW YORK NY 10036

Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	7			2	0	1	4		

Transaction ID : **SB21B.I20537**

Amount of Each Disbursement this Period

2	2	.	9	9
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. BMO HARRIS BANK NA 4595 1824**

Mailing Address CREDIT CARD PROCESSING CENTER

City State Zip Code  
MILWAUKEE WI 53201

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	4		

Transaction ID : **SB21B.I20391**

Amount of Each Disbursement this Period

5	8	7	.	5	0	1
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5	8	7	.	5	0	1
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5	8	7	.	5	0	1
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. BMO HARRIS BANK**

Mailing Address 770 N WATER STREET

City MILWAUKEE State WI Zip Code 53201

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	0			2	0	1	4		

Transaction ID : SB21B.I20568

Amount of Each Disbursement this Period

3	9	.	0	0
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CROWNE PLAZA MILWAUKEE**

Mailing Address 10499 INNOVATION DRIVE

City WAUWATOSA State WI Zip Code 53226

Purpose of Disbursement  
STAFF LODGING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	2			2	0	1	4		

Transaction ID : SB21B.I20541

Amount of Each Disbursement this Period

1	9	.	4	5	2
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. CROWNE PLAZA MILWAUKEE**

Mailing Address 10499 INNOVATION DRIVE

City WAUWATOSA State WI Zip Code 53226

Purpose of Disbursement  
STAFF LODGING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	2			2	0	1	4		

Transaction ID : SB21B.I20542

Amount of Each Disbursement this Period

2	0	.	6	0	3
---	---	---	---	---	---

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0	0	.	0	0
---	---	---	---	---

0	0	.	0	0
---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. CROWNE PLAZA MILWAUKEE**

Mailing Address 10499 INNOVATION DRIVE

City WAUWATOSA State WI Zip Code 53226

Purpose of Disbursement  
STAFF LODGING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		12		2014

Transaction ID : SB21B.I20543

Amount of Each Disbursement this Period

206.03
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. FTD.COM**

Mailing Address 3113 WOODCREEK DRIVE

City DOWNERS GROVE State IL Zip Code 60515

Purpose of Disbursement  
GIFTS GIVEN

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		26		2014

Transaction ID : SB21B.I20547

Amount of Each Disbursement this Period

166.98
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. GAB E PAY VOTER DATA**

Mailing Address 212 E WASHINGTON AVENUE

City MADISON State WI Zip Code 53707

Purpose of Disbursement  
OPEN RECORD REQUEST

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		18		2014

Transaction ID : SB21B.I20548

Amount of Each Disbursement this Period

110.00
--------

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. GAB E PAY VOTER DATA**

Mailing Address 212 E WASHINGTON AVENUE

City MADISON State WI Zip Code 53707

Purpose of Disbursement  
OPEN RECORD REQUEST

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 18 / 2014

Transaction ID : SB21B.I20549

Amount of Each Disbursement this Period

275.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. GAB E PAY VOTER DATA**

Mailing Address 212 E WASHINGTON AVENUE

City MADISON State WI Zip Code 53707

Purpose of Disbursement  
OPEN RECORD REQUEST

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2014

Transaction ID : SB21B.I20550

Amount of Each Disbursement this Period

95.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. GAB E PAY VOTER DATA**

Mailing Address 212 E WASHINGTON AVENUE

City MADISON State WI Zip Code 53707

Purpose of Disbursement  
OPEN RECORD REQUEST

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

Transaction ID : SB21B.I20551

Amount of Each Disbursement this Period

30.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. GAB E PAY VOTER DATA**

Mailing Address 212 E WASHINGTON AVENUE

City MADISON State WI Zip Code 53707

Purpose of Disbursement  
OPEN RECORD REQUEST

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 04 / 2014

Transaction ID : SB21B.I20552

Amount of Each Disbursement this Period

40.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. HILTON HOTELS CORP**

Mailing Address PHOENIX CENTRAL ACCOUNTING  
2901 NORTH CENTRAL AVE #600

City PHOENIX State AZ Zip Code 85012-2724

Purpose of Disbursement  
STAFF LODGING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 14 / 2014

Transaction ID : SB21B.I20553

Amount of Each Disbursement this Period

300.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. IN DIGITAL OUTDOORS**

Mailing Address .

City RHINELANDER State WI Zip Code 54501

Purpose of Disbursement  
ADVERTISING EXPENSE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 21 / 2014

Transaction ID : SB21B.I20554

Amount of Each Disbursement this Period

400.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. MICROSOFT**

Mailing Address 1 MICROSOFT WAY

City State Zip Code  
**REDMOND WA 98052**

Purpose of Disbursement  
**SOFTWARE**

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	01	/	2014

**Transaction ID : SB21B.I20555**

Amount of Each Disbursement this Period

112.00
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. OFFICE DEPOT**

Mailing Address 676 S WHITNEY WAY

City State Zip Code  
**MADISON WI 53711**

Purpose of Disbursement  
**OFFICE SUPPLIES**

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	28	/	2014

**Transaction ID : SB21B.I20557**

Amount of Each Disbursement this Period

478.25
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. PENSKE TRUCK LEASING CO.**

Mailing Address PO BOX 802577

City State Zip Code  
**CHICAGO IL 60680-2577**

Purpose of Disbursement  
**MOVING EXPENSE**

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	23	/	2014

**Transaction ID : SB21B.I20559**

Amount of Each Disbursement this Period

41.98
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[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. PENSKE TRUCK LEASING CO.**

Mailing Address PO BOX 802577

City State Zip Code  
CHICAGO IL 60680-2577

Purpose of Disbursement  
MOVING EXPENSE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 22 / 2014

Transaction ID : SB21B.I20560

Amount of Each Disbursement this Period

254.78

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. SAFESoft SOLUTIONS**

Mailing Address 20950 WARNER CENTER LANE

City State Zip Code  
WOODLAND CA 91367

Purpose of Disbursement  
PREDICTIVE DIALER

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 03 / 2014

Transaction ID : SB21B.I20561

Amount of Each Disbursement this Period

1490.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. THE MADISON CONCOURSE**

Mailing Address 1 W DAYTON ST

City State Zip Code  
MADISON WI 53703

Purpose of Disbursement  
EVENT HOSTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 29 / 2014

Transaction ID : SB21B.I20556

Amount of Each Disbursement this Period

653.93

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. THE UPS STORE**

Mailing Address 2811 MILTON AVENUE

City JANESVILLE State WI Zip Code 53545

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	5			2	0	1	4		

Transaction ID : SB21B.I20562

Amount of Each Disbursement this Period

2	3	.	3	4
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. WALMART**

Mailing Address 702 SW 8TH STREET

City BENTONVILLE State AR Zip Code 72716

Purpose of Disbursement  
FED EVENTS

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	9			2	0	1	4		

Transaction ID : SB21B.I20566

Amount of Each Disbursement this Period

1	9	1	.	7
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	4		

Transaction ID : SB21B.I20416

Amount of Each Disbursement this Period

9	2	.	6	9
---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

9	2	.	6	9
---	---	---	---	---

**TOTAL** This Period (last page this line number only)..... ▶

9	2	.	6	9
---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. PUBLIC OPINION STRATEGIES, LLC**

Mailing Address 214 N. FAYETTE ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
POLLING

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2014

Transaction ID : SB21B.I20499

Amount of Each Disbursement this Period

10500.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. PUBLIC OPINION STRATEGIES, LLC**

Mailing Address 214 N. FAYETTE ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
POLLING

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2014

Transaction ID : SB21B.I20500

Amount of Each Disbursement this Period

10500.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. SOUTHWEST PUBLISHING & MAILING CORP**

Mailing Address 4000 SE ADAMS STREET

City TOPEKA State KS Zip Code 66609

Purpose of Disbursement  
DIRECT MAIL - NOT FEA

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2014

Transaction ID : SB21B.I20440

Amount of Each Disbursement this Period

2405.92

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

23405.92

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. WAUKESHA EAST COMMERCE CENTER LLC**

Mailing Address 1703 PEARL STREET

City WAUKESHA State WI Zip Code 53186

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2014

Transaction ID : SB21B.I20520

Amount of Each Disbursement this Period

33.97

Full Name (Last, First, Middle Initial)

**B. CROSS RHODES STRATEGIES**

Mailing Address P.O. BOX 1264

City MADISON State WI Zip Code 53701

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2014

Transaction ID : SB21B.I20387

Amount of Each Disbursement this Period

8500.00

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2014

Transaction ID : SB21B.I20411

Amount of Each Disbursement this Period

29.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

8562.97

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
09 / 29 / 2014

Transaction ID : SB21B.I20412

Amount of Each Disbursement this Period

34.47

Full Name (Last, First, Middle Initial)

**B. ADVANTAGE DIRECT**

Mailing Address 2300 CLARENDON BOULEVARD

City State Zip Code  
ARLINGTON VA 22201

Purpose of Disbursement  
AUTO CALLS

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
09 / 30 / 2014

Transaction ID : SB21B.I20372

Amount of Each Disbursement this Period

824.84

Full Name (Last, First, Middle Initial)

**C. MAJORITY STRATEGIES**

Mailing Address 135 PROFESSIONAL DRIVE

City State Zip Code  
PONTE VEDRA BEACH FL 32082

Purpose of Disbursement  
PRINTING-NOT FEA

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
09 / 30 / 2014

Transaction ID : SB21B.I20505

Amount of Each Disbursement this Period

1725.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2584.31

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

### A. PIRYX

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

Transaction ID : SB21B.I20415

Amount of Each Disbursement this Period

92.34
-------

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

92.34
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641475.85
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. ELLOINE CLARK**

Mailing Address 3716 Maplewood Avenue

City DALLAS State TX Zip Code 75205

Purpose of Disbursement  
RETURNED CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 10 / 2014

Transaction ID : SB21B.I20597

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

15000.00

15000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. EMPLOYEE BENEFITS CORPORATION**

Mailing Address P.O. BOX 44347

City MADISON State WI Zip Code 53744-4347

Purpose of Disbursement  
EMPLOYEE BENEFITS

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 04 / 2014

Transaction ID : SB30B.I20288

Amount of Each Disbursement this Period

53.98

Full Name (Last, First, Middle Initial)

**B. ALEXA ARDIS**

Mailing Address 2616 HIGH MEADOW ROAD

City NAPERVILLE State IL Zip Code 60564

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : SB30B.I20289

Amount of Each Disbursement this Period

394.60

Full Name (Last, First, Middle Initial)

**C. NICOLE BEAMER**

Mailing Address 3026 SADDLE BROOK TRAIL

City SUN PRAIRIE State WI Zip Code 53590

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : SB30B.I20291

Amount of Each Disbursement this Period

969.68

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1418.26



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. DANIEL BORKHUS**

Mailing Address 403 W DOTY STREET

City MADISON State WI Zip Code 53703

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20292

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. LAUREN CLARK**

Mailing Address 5002 AUTUMN LANE

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20295

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. NICHOLAS COLLETTI**

Mailing Address 7718 36TH AVENUE

City KENOSHA State WI Zip Code 53142

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20296

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. PHILIP CURRY**

Mailing Address 131 W SILVER SPRING DRIVE

City State Zip Code  
WHITEFISH BAY WI 53217

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.I20297**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. PHILIP CURRY**

Mailing Address 131 W SILVER SPRING DRIVE

City State Zip Code  
WHITEFISH BAY WI 53217

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.I20526**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.I20578**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. THOMAS DALLMAN**

Mailing Address 348 E OKLAHOMA AVENUE

City BAY VIEW State WI Zip Code 53207

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : SB30B.I20298**

Amount of Each Disbursement this Period

969.68

Full Name (Last, First, Middle Initial)

**B. REED DHEIN**

Mailing Address 1333 MILTON STREET

City MADISON State WI Zip Code 53715

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : SB30B.I20299**

Amount of Each Disbursement this Period

51.72

Full Name (Last, First, Middle Initial)

**C. RICHARD DICKIE**

Mailing Address 126 N. BLAIR ST. #1

City MADISON State WI Zip Code 53703

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : SB30B.I20300**

Amount of Each Disbursement this Period

1173.17

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2194.57

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. ALYSSA DIGILIO**

Mailing Address 1013 FOX PATH

City WEST DUNDEE State IL Zip Code 60118

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20302

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. JESSE DOUGHERTY**

Mailing Address 5203 AUTUMN LEAF LANE

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20303

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. TIM DUFFY**

Mailing Address 5177 S 19TH STREET

City MILWAUKEE State WI Zip Code 53221

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20305

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. JOSEPH FADNESS**

Mailing Address 9506 S RYAN GREEN CT

City FRANKLIN State WI Zip Code 53132-2237

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I20306**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. JAMES FENLEY**

Mailing Address 406 BOWLAVARD AVENUE

City BELLEVILLE State WI Zip Code 53508

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I20309**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. DARLA FLEMMING**

Mailing Address 5001 S 69TH STREET

City GREENFIELD State WI Zip Code 53220

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I20310**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. JOHN FOSTER**

Mailing Address 2416 E WASHINGTON AVENUE

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : SB30B.I20311

Amount of Each Disbursement this Period

666.80

Full Name (Last, First, Middle Initial)

**B. SYDNEY FUQUA**

Mailing Address 8504 E 94TH STREET

City TULSA State OK Zip Code 74133

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : SB30B.I20313

Amount of Each Disbursement this Period

944.08

Full Name (Last, First, Middle Initial)

**C. KYLE FUREY**

Mailing Address W347 S9140 JORDAN TRAIL

City EAGLE State WI Zip Code 53119

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : SB30B.I20314

Amount of Each Disbursement this Period

969.68

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2580.56

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. KYLE FUREY**

Mailing Address W347 S9140 JORDAN TRAIL

City State Zip Code  
EAGLE WI 53119

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : SB30B.I20569

Amount of Each Disbursement this Period

90.53

Full Name (Last, First, Middle Initial)

**B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : SB30B.I20579

Amount of Each Disbursement this Period

90.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. BEN GILES**

Mailing Address 1510 TRIPP CIRCLE

City State Zip Code  
MADISON WI 53706

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : SB30B.I20316

Amount of Each Disbursement this Period

232.05

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

322.58

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. SAMANTHA GILKES**

Mailing Address 31 N RANDALL AVENUE

City MADISON State WI Zip Code 53715

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20317

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. ANDREW GOWDY**

Mailing Address W279 N5886 WALNUT GROVE DR.

City SUSSEX State WI Zip Code 53089

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20319

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. MARTHA GRAVLEE**

Mailing Address 2440 OAK RIDGE CIRCLE

City DE PERE State WI Zip Code 54115

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20321

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. MARTHA GRAVLEE**

Mailing Address 2440 OAK RIDGE CIRCLE

City DE PERE State WI Zip Code 54115

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : SB30B.I20570

Amount of Each Disbursement this Period

413.40

Full Name (Last, First, Middle Initial)

**B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : SB30B.I20580

Amount of Each Disbursement this Period

413.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. KELLY GROSSHUESCH**

Mailing Address 914 DREIFUERST ROAD

City PLYMOUTH State WI Zip Code 53073

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : SB30B.I20322

Amount of Each Disbursement this Period

394.60

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

808.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. ANDREW HAYES**

Mailing Address 187 CHASE DRIVE

City State Zip Code  
PELHAM AL 35124

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20323

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. BENJAMIN HEATH**

Mailing Address 5088 LANGSTON COURT

City State Zip Code  
VIRGINIA BEACH VA 23464

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20324

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. DONNA HEIMBACH**

Mailing Address 3002 DIANNE DRIVE

City State Zip Code  
MIDDLETON WI 53562-2425

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20325

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. ANDREA HELLENBRAND**

Mailing Address 6635 WINDSOR COMMONS AVENUE

City WINDSOR State WI Zip Code 53598

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I20328**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. CHRIS JENKYN**

Mailing Address 463 PARK PLACE

City KEWASKUM State WI Zip Code 53040

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I20329**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. JOSEF LEVERATTO**

Mailing Address 16011 VIA SOLA

City LAKE ELSINARE State CA Zip Code 92530

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I20332**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. LARRY LOOMIS**

Mailing Address 762 BRIAR LN

City BELOIT State WI Zip Code 53511

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20333

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. ALEXANDER MANDRY**

Mailing Address 513 LEWIS STREET

City BURLINGTO State WI Zip Code 53105

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20335

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. CHRIS MARTIN**

Mailing Address 100 CORRINA BOULEVARD

City WAUKESHA State WI Zip Code 53186

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20337

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. CHRIS MARTIN**

Mailing Address 100 CORRINA BOULEVARD

City WAUKESHA State WI Zip Code 53186

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

Transaction ID : SB30B.I20571

Amount of Each Disbursement this Period

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. JEFFERSON COUNTY CLERK OF COURTS**

Mailing Address 311 S CENTER AVENUE

City JEFFERSON State WI Zip Code 53549

Purpose of Disbursement  
OPEN RECORDS REQUEST

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

Transaction ID : SB30B.I20582

Amount of Each Disbursement this Period

Category/  
Type

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

Transaction ID : SB30B.I20581

Amount of Each Disbursement this Period

Category/  
Type

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

### A. SEAN MCNALLY

Mailing Address 3037 BOSSHARD DRIVE

City MADISON State WI Zip Code 53711

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	4		

Transaction ID : SB30B.I20338

Amount of Each Disbursement this Period

9	6	9	.	6	9
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

### B. SEAN MCNALLY

Mailing Address 3037 BOSSHARD DRIVE

City MADISON State WI Zip Code 53711

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	4		

Transaction ID : SB30B.I20572

Amount of Each Disbursement this Period

1	2	9	.	1	6
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

### C. MILEAGE

Mailing Address

City State Zip Code

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	4		

Transaction ID : SB30B.I20583

Amount of Each Disbursement this Period

8	0	.	1	0	8	5
---	---	---	---	---	---	---

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1	0	9	.	8	5
---	---	---	---	---	---

1	0	9	.	8	5
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. WALMART**

Mailing Address 702 SW 8TH STREET

City BENTONVILLE State AR Zip Code 72716

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2014

Transaction ID : SB30B.I20584

Amount of Each Disbursement this Period

20.23
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. STEPHEN MEYER**

Mailing Address 4418 N STOWELL AVENUE

City MILWAUKEE State WI Zip Code 53211

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2014

Transaction ID : SB30B.I20339

Amount of Each Disbursement this Period

995.27
--------

Full Name (Last, First, Middle Initial)

**C. ANDREW MLYNCZAK**

Mailing Address 2133 CUMBERLAND DRIVE

City GREEN BAY State WI Zip Code 54311

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2014

Transaction ID : SB30B.I20340

Amount of Each Disbursement this Period

111.05
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1106.32
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. MARK MORGAN**

Mailing Address 2408 SESSIONS ST

City State Zip Code  
EAU CLAIRE WI 54701

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20342

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. HANNAH O' CONNOR**

Mailing Address 2200 MEADOW GREEN

City State Zip Code  
STOUGHTON WI 53589

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20345

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. REBECCA OLSON**

Mailing Address 614 SCOTT AVENUE

City State Zip Code  
OSHKOSH WI 54901

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20346

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. REBECCA OLSON**

Mailing Address 614 SCOTT AVENUE

City OSHKOSH State WI Zip Code 54901

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : SB30B.I20573

Amount of Each Disbursement this Period

69.58

Full Name (Last, First, Middle Initial)

**B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : SB30B.I20587

Amount of Each Disbursement this Period

58.13

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. WALMART**

Mailing Address 702 SW 8TH STREET

City BENTONVILLE State AR Zip Code 72716

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
08 / 26 / 2014

Transaction ID : SB30B.I20589

Amount of Each Disbursement this Period

4.65

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

69.58

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. RAMON ORTIZ**

Mailing Address 5110 CAMDEN ROAD

City MADISON State WI Zip Code 53716

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20347

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. ORLANDO OWENS**

Mailing Address 3177 N BUFFUM STREET

City MILWAUKEE State WI Zip Code 53212

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20349

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. ORLANDO OWENS**

Mailing Address 3177 N BUFFUM STREET

City MILWAUKEE State WI Zip Code 53212

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20574

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I20590**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. SCOTT POOLE**

Mailing Address 1528 SELLERY STREET

City State Zip Code  
MIDDLETON WI 53562

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I20350**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. GREG QUELLA**

Mailing Address 2209 COUNTY ROAD KK

City State Zip Code  
MOSINEE WI 54455

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I20352**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. GREG QUELLA**

Mailing Address 2209 COUNTY ROAD KK

City State Zip Code  
MOSINEE WI 54455

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : SB30B.I20575

Amount of Each Disbursement this Period

162.00

Full Name (Last, First, Middle Initial)

**B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : SB30B.I20591

Amount of Each Disbursement this Period

162.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. JASON RECTOR**

Mailing Address 1902 40TH AVENUE

City State Zip Code  
OSCEOLA WI 54020

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : SB30B.I20353

Amount of Each Disbursement this Period

944.08

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1106.08

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. LINDA RICHARDS**

Mailing Address 652 TOWER DRIVE

City SUN PRAIRIE State WI Zip Code 53590

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20355

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. LANE RUHLAND**

Mailing Address 1044 N HIGH POINT ROAD

City MADISON State WI Zip Code 53717

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20357

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. JAMES SAPP**

Mailing Address 134 FALLING WATERS LANE

City MAYLENE State AL Zip Code 35114

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20358

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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for each category of the  
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. CHRIS SCHAEFER**

Mailing Address 1338 W 4TH STREET

City State Zip Code  
KIMBERLY WI 54136

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I20360**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. CHRIS SCHAEFER**

Mailing Address 1338 W 4TH STREET

City State Zip Code  
KIMBERLY WI 54136

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I20576**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I20592**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

### A. JONATHAN SCHMIEDER

Mailing Address 3117 STRATTON WAY, APT 207

City MADISON State WI Zip Code 53719

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

Transaction ID : SB30B.I20361

Amount of Each Disbursement this Period

1820.42

Full Name (Last, First, Middle Initial)

### B. COOPER SMITH

Mailing Address 20815 GLEN COVE

City GARDEN RIDGE State TX Zip Code 78266

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

Transaction ID : SB30B.I20362

Amount of Each Disbursement this Period

945.00

Full Name (Last, First, Middle Initial)

### C. CARL STOLTE

Mailing Address 3519 ROMA LANE

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

Transaction ID : SB30B.I20363

Amount of Each Disbursement this Period

120.77

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2886.19

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. WILL THOMPSON**

Mailing Address 1007 N CASS STREET

City MILWAUKEE State WI Zip Code 53202

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I20365**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. JOSSELYN VALASQUEZ**

Mailing Address 614 LANGDON STREET

City MADISON State WI Zip Code 53703

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I20367**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. JOSHUA WILSON**

Mailing Address 641 W. MAIN STREET

City MADISON State WI Zip Code 53703

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I20368**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. JOSHUA ZDROIK**

Mailing Address 756 BUS LANE

City State Zip Code  
STEVENS POINT WI 54482

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.I20370**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City State Zip Code  
HAUPPAUGE NY 11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.I20265**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City State Zip Code  
HAUPPAUGE NY 11788

Purpose of Disbursement  
PAYROLL PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.I20267**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City State Zip Code  
HAUPPAUGE NY 11788

Purpose of Disbursement  
PAYROLL PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 15 / 2014

Transaction ID : SB30B.I20269

Amount of Each Disbursement this Period

86.00

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City State Zip Code  
HAUPPAUGE NY 11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 15 / 2014

Transaction ID : SB30B.I20271

Amount of Each Disbursement this Period

158.81

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City State Zip Code  
HAUPPAUGE NY 11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 15 / 2014

Transaction ID : SB30B.I20274

Amount of Each Disbursement this Period

444.32

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

689.13

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City State Zip Code  
HAUPPAUGE NY 11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : SB30B.I20276

Amount of Each Disbursement this Period

4386.04

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City State Zip Code  
HAUPPAUGE NY 11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : SB30B.I20278

Amount of Each Disbursement this Period

7128.42

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City State Zip Code  
HAUPPAUGE NY 11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : SB30B.I20279

Amount of Each Disbursement this Period

7271.93

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

18786.39

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. AMERICAN FUNDS SERVICE COMPANY**

Mailing Address **BOX 6164**

City **INDIANAPOLIS** State **IN** Zip Code **46206-6164**

Purpose of Disbursement  
**EMPLOYEE SIMPLE IRA**

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I20280**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. AMERICAN FUNDS SERVICE COMPANY**

Mailing Address **BOX 6164**

City **INDIANAPOLIS** State **IN** Zip Code **46206-6164**

Purpose of Disbursement  
**EMPLOYEE SIMPLE IRA**

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I20282**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. NICHOLAS COLLETTI**

Mailing Address **7718 36TH AVENUE**

City **KENOSHA** State **WI** Zip Code **53142**

Purpose of Disbursement  
**PAYROLL**

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I20343**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. JOHN MAHAN**

Mailing Address 1806 BELKNAP STREET

City State Zip Code  
SUPERIOR WI 54880

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 17 / 2014

**Transaction ID : SB30B.I20330**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. DEAN CARE**

Mailing Address P.O. BOX 673111

City State Zip Code  
CHICAGO IL 60695

Purpose of Disbursement  
HEALTH INSURANCE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 23 / 2014

**Transaction ID : SB30B.I20285**

Amount of Each Disbursement this Period

2326.78

Full Name (Last, First, Middle Initial)

**C. DEAN CARE**

Mailing Address P.O. BOX 673111

City State Zip Code  
CHICAGO IL 60695

Purpose of Disbursement  
HEALTH INSURANCE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 23 / 2014

**Transaction ID : SB30B.I20286**

Amount of Each Disbursement this Period

5882.64

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

9209.42

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. DELTA DENTAL**

Mailing Address P.O. BOX 828

City State Zip Code  
STEVENS POINT WI 54481

Purpose of Disbursement  
DENTAL INSURANCE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.I20287**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. NICOLE BEAMER**

Mailing Address 3026 SADDLE BROOK TRAIL

City State Zip Code  
SUN PRAIRIE WI 53590

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.I20290**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. DANIEL BORKHUS**

Mailing Address 403 W DOTY STREET

City State Zip Code  
MADISON WI 53703

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.I20293**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

### A. LAUREN CLARK

Mailing Address 5002 AUTUMN LANE

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

Transaction ID : SB30B.I20294

Amount of Each Disbursement this Period

1	5	7	.	2	5
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

### B. RICHARD DICKIE

Mailing Address 126 N. BLAIR ST. #1

City MADISON State WI Zip Code 53703

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

Transaction ID : SB30B.I20301

Amount of Each Disbursement this Period

1	1	8	.	1	5
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

### C. RICHARD DICKIE

Mailing Address 126 N. BLAIR ST. #1

City MADISON State WI Zip Code 53703

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

Transaction ID : SB30B.I20525

Amount of Each Disbursement this Period

2	3	.	0	0
---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2	7	8	.	7	9
---	---	---	---	---	---

2	7	8	.	7	9
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. PIZZA HUT**

Mailing Address 7100 CORPORATE DRIVE

City PLANO State TX Zip Code 75024

Purpose of Disbursement  
STAFF MEALS

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20577

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. JESSE DOUGHERTY**

Mailing Address 5203 AUTUMN LEAF LANE

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20304

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. JOSEPH FADNESS**

Mailing Address 9506 S RYAN GREEN CT

City FRANKLIN State WI Zip Code 53132-2237

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20307

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. JAMES FENLEY**

Mailing Address 406 BOWLAVARD AVENUE

City BELLEVILLE State WI Zip Code 53508

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I20308**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. JOHN FOSTER**

Mailing Address 2416 E WASHINGTON AVENUE

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I20312**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. BEN GILES**

Mailing Address 1510 TRIPP CIRCLE

City MADISON State WI Zip Code 53706

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I20315**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. SAMANTHA GILKES**

Mailing Address 31 N RANDALL AVENUE

City MADISON State WI Zip Code 53715

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : SB30B.I20318**

Amount of Each Disbursement this Period

394.60

Full Name (Last, First, Middle Initial)

**B. ANDREW GOWDY**

Mailing Address W279 N5886 WALNUT GROVE DR.

City SUSSEX State WI Zip Code 53089

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : SB30B.I20320**

Amount of Each Disbursement this Period

1281.48

Full Name (Last, First, Middle Initial)

**C. DONNA HEIMBACH**

Mailing Address 3002 DIANNE DRIVE

City MIDDLETON State WI Zip Code 53562-2425

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : SB30B.I20326**

Amount of Each Disbursement this Period

738.25

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2414.33

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

### A. ANDREA HELLENBRAND

Mailing Address 6635 WINDSOR COMMONS AVENUE

City WINDSOR State WI Zip Code 53598

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : SB30B.I20327

Amount of Each Disbursement this Period

1262.73

Full Name (Last, First, Middle Initial)

### B. JOSEF LEVERATTO

Mailing Address 16011 VIA SOLA

City LAKE ELSINARE State CA Zip Code 92530

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : SB30B.I20331

Amount of Each Disbursement this Period

1288.31

Full Name (Last, First, Middle Initial)

### C. LARRY LOOMIS

Mailing Address 762 BRIAR LN

City BELOIT State WI Zip Code 53511

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : SB30B.I20334

Amount of Each Disbursement this Period

634.63

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3185.67

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. ALEXANDER MANDRY**

Mailing Address 513 LEWIS STREET

City State Zip Code  
**BURLINGTO WI 53105**

Purpose of Disbursement  
**PAYROLL**

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SB30B.I20336**

Amount of Each Disbursement this Period

305.70

Full Name (Last, First, Middle Initial)

**B. ANDREW MLYNCZAK**

Mailing Address 2133 CUMBERLAND DRIVE

City State Zip Code  
**GREEN BAY WI 54311**

Purpose of Disbursement  
**PAYROLL**

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SB30B.I20341**

Amount of Each Disbursement this Period

239.94

Full Name (Last, First, Middle Initial)

**C. HANNAH O' CONNOR**

Mailing Address 2200 MEADOW GREEN

City State Zip Code  
**STOUGHTON WI 53589**

Purpose of Disbursement  
**PAYROLL**

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SB30B.I20344**

Amount of Each Disbursement this Period

944.07

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1489.71

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. RAMON ORTIZ**

Mailing Address 5110 CAMDEN ROAD

City MADISON State WI Zip Code 53716

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	4		

Transaction ID : SB30B.I20348

Amount of Each Disbursement this Period

2	8	4	.	3	1
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. SCOTT POOLE**

Mailing Address 1528 SELLERY STREET

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	4		

Transaction ID : SB30B.I20351

Amount of Each Disbursement this Period

2	7	9	.	0	4
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. LINDA RICHARDS**

Mailing Address 652 TOWER DRIVE

City SUN PRAIRIE State WI Zip Code 53590

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	4		

Transaction ID : SB30B.I20354

Amount of Each Disbursement this Period

8	.	2	4
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5	7	1	.	5	9
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5	7	1	.	5	9
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. LANE RUHLAND**

Mailing Address 1044 N HIGH POINT ROAD

City MADISON State WI Zip Code 53717

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20356

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. CHRIS SCHAEFER**

Mailing Address 1338 W 4TH STREET

City KIMBERLY State WI Zip Code 54136

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20359

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. CARL STOLTE**

Mailing Address 3519 ROMA LANE

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I20364

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. JOSSELYN VALASQUEZ**

Mailing Address 614 LANGDON STREET

City MADISON State WI Zip Code 53703

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2014

Transaction ID : SB30B.I20366

Amount of Each Disbursement this Period

22.16

Full Name (Last, First, Middle Initial)

**B. JOSHUA WILSON**

Mailing Address 641 W. MAIN STREET

City MADISON State WI Zip Code 53703

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2014

Transaction ID : SB30B.I20369

Amount of Each Disbursement this Period

510.29

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2014

Transaction ID : SB30B.I20266

Amount of Each Disbursement this Period

10.83

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

543.28

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. ACCOUNTANTS WORLD PAYROLL LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 30 / 2014
Mailing Address 140 FELL COURT		<b>Transaction ID : SB30B.I20268</b>
City HAUPPAUGE	State NY	
Zip Code 11788	Purpose of Disbursement PAYROLL PROCESSING FEE	Amount of Each Disbursement this Period 86.00
Candidate Name	Category/Type	
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>B. ACCOUNTANTS WORLD PAYROLL LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 30 / 2014
Mailing Address 140 FELL COURT		<b>Transaction ID : SB30B.I20270</b>
City HAUPPAUGE	State NY	
Zip Code 11788	Purpose of Disbursement PAYROLL TAX	Amount of Each Disbursement this Period 129.98
Candidate Name	Category/Type	
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. ACCOUNTANTS WORLD PAYROLL LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 30 / 2014
Mailing Address 140 FELL COURT		<b>Transaction ID : SB30B.I20272</b>
City HAUPPAUGE	State NY	
Zip Code 11788	Purpose of Disbursement PAYROLL TAX	Amount of Each Disbursement this Period 158.99
Candidate Name	Category/Type	
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).....▶	374.97
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

Transaction ID : SB30B.I20273

Amount of Each Disbursement this Period

3	3	7	.	0	4
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

Transaction ID : SB30B.I20275

Amount of Each Disbursement this Period

9	1	1	.	2	7
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

Transaction ID : SB30B.I20277

Amount of Each Disbursement this Period

6	0	5	.	3	3
---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

7	3	0	.	1	6
---	---	---	---	---	---

**TOTAL** This Period (last page this line number only)..... ▶

7	3	0	.	1	6
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. AMERICAN FUNDS SERVICE COMPANY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2014

Mailing Address BOX 6164

**Transaction ID : SB30B.I20281**

City INDIANAPOLIS State IN Zip Code 46206-6164

Amount of Each Disbursement this Period

95.04
-------

Purpose of Disbursement  
EMPLOYEE SIMPLE IRA

Category/ Type
-------------------

Candidate Name

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Full Name (Last, First, Middle Initial)

**B. AMERICAN FUNDS SERVICE COMPANY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2014

Mailing Address BOX 6164

**Transaction ID : SB30B.I20283**

City INDIANAPOLIS State IN Zip Code 46206-6164

Amount of Each Disbursement this Period

125.63
--------

Purpose of Disbursement  
EMPLOYEE SIMPLE IRA

Category/ Type
-------------------

Candidate Name

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Full Name (Last, First, Middle Initial)

**C. ASSURANT EMPLOYEE BENEFITS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2014

Mailing Address P.O. BOX 807009

**Transaction ID : SB30B.I20284**

City KANSAS CITY State MO Zip Code 64184

Amount of Each Disbursement this Period

178.54
--------

Purpose of Disbursement  
EMPLOYEE BENEFITS

Category/ Type
-------------------

Candidate Name

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

399.21
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106091.26
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**SCHEDULE H1 (FEC Form 3X)**

**METHOD OF ALLOCATION FOR:**

- **ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)**
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)**

NAME OF COMMITTEE (In Full)  
 Republican Party of Wisconsin

Transaction ID : KML1

**USE ONLY ONE SECTION, A or B**

**A. State and Local Party Committees**

**Fixed Percentage (select one)**

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees**

**Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check   
**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %  
 Nonfederal .....  %

This ratio applies to (check all that apply):

- Administrative
- Generic Voter Drive
- Public Communications Referencing Party Only

**SCHEDULE H3 (FEC Form 3X)  
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Republican Party of Wisconsin - State Account	MM / DD / YYYY 09 / 26 / 2014	11956.82

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	11956.82
<b>Transaction ID : 12345679</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	11956.82
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred).....	11956.82

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Form A: Full Name (Last, First, Middle Initial) Transaction ID : 101614a
ADVANCED DISPOSAL
Mailing Address PO BOX 6484
City CAROL STREAM State IL Zip Code 60197
Purpose of Disbursement: WASTE REMOVAL
Activity or Event Identifier:
Allocated Activity or Event: Administrative [X] Fundraising [ ] Exempt [ ]
Voter Drive [ ] Direct Candidate Support [ ]
Public Comm (ref to party only) by PAC [ ]
Allocated Activity or Event Year-To-Date: 211.88
Date: 09 / 26 / 2014
FEDERAL SHARE: 31.77 NONFEDERAL SHARE: 180.10 TOTAL AMOUNT: 211.88

Form B: Full Name (Last, First, Middle Initial) Transaction ID : 101614B
AT&T MOBILITY
Mailing Address PO BOX 6463
City CAROL STREAM State IL Zip Code 60197
Purpose of Disbursement: PHONE BILL
Activity or Event Identifier:
Allocated Activity or Event: Administrative [X] Fundraising [ ] Exempt [ ]
Voter Drive [ ] Direct Candidate Support [ ]
Public Comm (ref to party only) by PAC [ ]
Allocated Activity or Event Year-To-Date: 1682.51
Date: 09 / 26 / 2014
FEDERAL SHARE: 220.59 NONFEDERAL SHARE: 1250.04 TOTAL AMOUNT: 1470.63

Form C: Full Name (Last, First, Middle Initial) Transaction ID : 101614C
BADGERLAND CHEMICAL & SUPPLY
Mailing Address PO BOX 620303
City MIDDLETON State WI Zip Code 53562
Purpose of Disbursement: CUSTODIAL SUPPLIES
Activity or Event Identifier:
Allocated Activity or Event: Administrative [X] Fundraising [ ] Exempt [ ]
Voter Drive [ ] Direct Candidate Support [ ]
Public Comm (ref to party only) by PAC [ ]
Allocated Activity or Event Year-To-Date: 1870.86
Date: 09 / 26 / 2014
FEDERAL SHARE: 28.25 NONFEDERAL SHARE: 160.10 TOTAL AMOUNT: 188.35

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 280.61, 1590.24, 1870.86

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [ ], [ ], [ ]

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : 101614D</b> <b>CENTURY SPRINGS BOTTLING CO</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 275		Allocated Activity or Event Year-To-Date _____ 1925.86	
City State Zip Code GENESEE DEPOT WI 53127	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: OFFICE WATER			
Activity or Event Identifier:			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 8.25      _____ 46.75      _____ 55.00			

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : 101614F</b> <b>CHARTER</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 790086		Allocated Activity or Event Year-To-Date _____ 2458.44	
City State Zip Code ST LOUIS MO 63179	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: CABLE/INTERNET			
Activity or Event Identifier:			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 79.89      _____ 452.69      _____ 532.58			

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : 101614H</b> <b>CITY OF APPLETON</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 100 N APPLETON ST		Allocated Activity or Event Year-To-Date _____ 2832.16	
City State Zip Code APPLETON WI 54911	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: PHOTOCOPIES			
Activity or Event Identifier:			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 56.06      _____ 317.66      _____ 373.72			

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 144.20		_____ 817.10		_____ 961.30

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Transaction ID : 101614I
CITY OF MADISON TREASURER
Mailing Address PO BOX 2997
City MADISON State WI Zip Code 53701
Purpose of Disbursement: WATER/SEWER
Activity or Event Identifier:
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 2992.41
Date 09 / 26 / 2014
FEDERAL SHARE 24.04 + NONFEDERAL SHARE 136.21 = TOTAL AMOUNT 160.25

B. Full Name (Last, First, Middle Initial) Transaction ID : 101614J
COMCAST
Mailing Address PO BOX 34744
City SEATTLE State WA Zip Code 98124
Purpose of Disbursement: CABLE
Activity or Event Identifier:
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 3106.06
Date 09 / 26 / 2014
FEDERAL SHARE 17.05 + NONFEDERAL SHARE 96.60 = TOTAL AMOUNT 113.65

C. Full Name (Last, First, Middle Initial) Transaction ID : 101614K
HEINZEN PRINTING INC.
Mailing Address PO BOX 267
City MARSHFIELD State WI Zip Code 54449
Purpose of Disbursement: PRINTING - OVERHEAD
Activity or Event Identifier:
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 3757.00
Date 09 / 26 / 2014
FEDERAL SHARE 97.64 + NONFEDERAL SHARE 553.30 = TOTAL AMOUNT 650.94

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 138.73, 786.11, 924.84

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : 101614L</b> <b>KONICA MINOLTA PREMIER FINANCE</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 740423		Allocated Activity or Event Year-To-Date _____ 5059.99	
City ATLANTA State GA Zip Code 30374	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: COPIER LEASE		Allocated Activity or Event Year-To-Date _____ 5059.99	
Activity or Event Identifier:		Date <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 195.45		_____ 1107.54	
		_____ 1302.99	

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : 101614M</b> <b>LEXISNEXIS</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 2314		Allocated Activity or Event Year-To-Date _____ 5258.99	
City CAROL STREAM State IL Zip Code 60132	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: SUBSCRIPTION		Allocated Activity or Event Year-To-Date _____ 5258.99	
Activity or Event Identifier:		Date <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 29.85		_____ 169.15	
		_____ 199.00	

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : 101614N</b> <b>MCAFFEE INC</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 6052 PAYSHERE CIR		Allocated Activity or Event Year-To-Date _____ 5828.69	
City CHICAGO State IL Zip Code 60674	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: SUBSCRIPTION		Allocated Activity or Event Year-To-Date _____ 5828.69	
Activity or Event Identifier:		Date <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 85.46		_____ 484.25	
		_____ 569.70	

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 310.76		_____ 1760.94		_____ 2071.69

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____



SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Form A: MG&E, Transaction ID: 1016140. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (UTILITIES), and Allocated Activity or Event (Administrative checked). Total amount: 1007.92.

Form B: NESTLE PURE LIFE, Transaction ID: 101614P. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (BOTTLED WATER), and Allocated Activity or Event (Administrative checked). Total amount: 373.76.

Form C: TDS, Transaction ID: 101614Q. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (OFFICE PHONES), and Allocated Activity or Event (Administrative checked). Total amount: 346.04.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 259.17, NONFEDERAL SHARE 1468.55, TOTAL AMOUNT 1727.72.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : 101614R</b> <b>TDS METROCOM</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 94510		Allocated Activity or Event Year-To-Date 8858.22	
City PALATINE State IL Zip Code 60094	Date MM / DD / YYYY 09 / 26 / 2014		
Purpose of Disbursement: OFFICE PHONES	Category/Type		
Activity or Event Identifier:	FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 195.27 + 1106.54 = 1301.81		

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : 101614S</b> <b>VERIZON</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 25505		Allocated Activity or Event Year-To-Date 9085.08	
City LEHIGH VALLEY State PA Zip Code 18002	Date MM / DD / YYYY 09 / 26 / 2014		
Purpose of Disbursement: CELLPHONES	Category/Type		
Activity or Event Identifier:	FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 34.03 + 192.83 = 226.86		

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : 101614T</b> <b>WE ENERGIES</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 231 W MICHIGAN ST		Allocated Activity or Event Year-To-Date 9770.84	
City MILWAUKEE State WI Zip Code 53203	Date MM / DD / YYYY 09 / 26 / 2014		
Purpose of Disbursement: UTILITIES	Category/Type		
Activity or Event Identifier:	FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 102.86 + 582.90 = 685.76		

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
332.16		1882.27		2214.43

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[Empty Box]	[Empty Box]	[Empty Box]

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : 101614U</b> <b>WISC DEPT OF REVENUE</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 930208		Allocated Activity or Event Year-To-Date _____ 13365.42	
City MILWAUKEE State WI Zip Code 53293	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: SALES/USE TAX Activity or Event Identifier:		_____	
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
_____ 539.19		_____ 3055.39	_____ 3594.58

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : 101614V</b> <b>WISCONSIN PUBLIC SERVICE CORP</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 19003		Allocated Activity or Event Year-To-Date _____ 13580.46	
City GREEN BAY State WI Zip Code 54307	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: UTILITIES Activity or Event Identifier:		_____	
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
_____ 32.25		_____ 182.79	_____ 215.04

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : 101614W</b> <b>XCEL ENERGY</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 9477		Allocated Activity or Event Year-To-Date _____ 14066.85	
City MINNEAPOLIS State MN Zip Code 55484	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: UTILITIES Activity or Event Identifier:		_____	
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
_____ 72.96		_____ 413.43	_____ 486.39

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 644.40		_____ 3651.61		_____ 4296.01

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____ 2110.03	_____ 11956.82	_____ 14066.85