FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(See instru	_	Office use only
NAME OF COMMITTEE (in a	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5
Republican Pa	erty of Wisconsin		
ADDRESS (number and s	street) 148 E. Johnson S	Street	
(Check if address is changed)	ess Madison		WI
001414		CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAI			
COMMITTEE'S WER	PAGE ADDRESS (URL)		
www.wisgop.o			I
	<u> </u>		
2. DATE 0.2			
3. FEC IDENTIFICA	TION NUMBER	C C00074450	
4. IS THIS STATEM	ENT NEW (N) O	R X AMENDED (A)	
I certify that I have exami	ned this Statement and to the best of my		and complete
Type or Print Name of	Treasurer Reince Prieb	us	
Signature of Treasurer	Electronically Filed by Reince	Priebus	Date 12 / 21 / 2006
NOTE: Submission of fal		n may subject the person signing this SI	atement to the penalties of 2 U.S.C. S437g. WITHIN 10 DAYS
Office Use Only		For further informatio Federal Election Comm Toll Free 800-424-953	ission FEC FORM 1

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5.	TYPE OF COMMITTEE (Check One)				
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)				
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the caminformation below.)	ndidate			
	Name of Candidate				
	Party Affiliation Sought: House Senate President	State District			
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.				
	Name of Candidate				
		nocratic, iblican,etc.) Party.			
6. I	Name of Any Connected Organization or Affiliated Committee None	1			
L					
	Mailing Address 228 S Washington St. STE 340				
	Alexandria VA 223	14 – 📗			
	CITY▲ STATE▲ ZI	P CODE A			
	Relationship Joint Cmte. Rep				
	Type of Connected Organization:				
	Corporation Corporation w/o Capital Stock Labor Organization	1			
	Membership Organization Trade Association Cooperative				

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Write or Type Co	ommittee Name			
Republica	n Party of Wisc	onsin		
		ntify by name, address, (phone number cooks and records.	optional), and position of th	ne person in
Full Name	Kathryn	Mize		
Mailing Address		414 N Livingston Street #2		
		Madison		53703
Title or Position	on 🔻	CITY A	STATE	ZIP CODE A
	Controller	т	608 elephone number	257 4765
Full Name		lesignated agent (e.g., assistant treasurer) Priebus 3617 Kingberry St		
ag / ida. c				
		Racine		53406
Title or Position	on ♥	CITY A	STATE	ZIP CODE A
			elephone number	
Full Name of Designated Agent	Rick Wil	еу		
Mailing Addre				
	ess	529 Aztalan Drive		
	ess	529 Aztalan Drive Madison		53718
Title or Position			WI	53718
Title or Position		Madison CITY ▲		

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9.	Banks or Other Deposito safety deposit boxes or mai Name of Bank, Depository,	intains funds.	unts, rents
	Wad	chovia Bank	
	Mailing Address	1753 Pinnacle Dr., 3rd FL	
		McLean VA 22	2102

STATE ∠

 $\textbf{ZIP CODE} \quad \triangle$

CITY 🗷

Type of Connected Organization:

Membership Organization

Corporation

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Banks or Other Depositories: safety deposit boxes or maintains Name of Bank, Depository, etc.	List all banks or other depositories in which the committee funds.	e deposits funds, h	olds accounts, rents
Mailing Address	ia Bank 1753 Pinnacle Dr., 3rd FL McLean CITY △	VA STATE △	22102 -
Name of Any Connected Orga	nnization or Affiliated Committee		[ADDITIONAL]
None			
Mailing Address	228 South Washington Street		
	Suite 115		
	Alexandria	VA	22314
	CITY▲	STATE A	ZIP CODE A
Relationship Joint Fu	ndraising Re		

Corporation w/o Capital Stock

Trade Association

Labor Organization

Cooperative

Designated Agent		[A	ADDITIONAL]
Full Name			
Mailing Address			
Title or Position ▼	CITY A	STATE A	ZIP CODE A
	Te	lephone number	

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Corporation

Membership Organization

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Banks or Other Depositories: safety deposit boxes or maintains Name of Bank, Depository, etc.	List all banks or other depositories in which the committee stunds.	deposits funds, holds accounts, rents
Mailing Address	1909 K St NW Washington CITY △	DC 20006 - STATE △ ZIP CODE △
Name of Any Connected Orga	nization or Affiliated Committee	[ADDITIONAL]
Wisconsin Road to Victor	y Committee	
Mailing Address	228 S Washington St STE115	
	Alexandria	VA 22314 _
	CITY ▲	STATE A ZIP CODE A
Relationship Joint Cn Type of Connected Organization		

Corporation w/o Capital Stock

Trade Association

Labor Organization

Cooperative

Designated Agent	1	ADDITIONAL]	
Full Name			
Title or Position ▼	CITY A		
		elephone number	