

# 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)

## 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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

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

M M M / D D D / Y Y Y Y Y Y  
09 01 2013

through

M M M / D D D / Y Y Y Y Y Y  
09 30 2013

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

M M M / D D D / Y Y Y Y Y Y  
10 20 2013

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

Office  
Use  
OnlyFEC FORM 3X  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Republican Party of Wisconsin

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 09 / 01 / 2013

To:

 M M / D D / Y Y Y Y Y  
 09 / 30 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2013		1696248.58
(b) Cash on Hand at Beginning of Reporting Period.....	1345077.93	
(c) Total Receipts (from Line 19) .....	194442.70	1577917.69
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1539520.63	3274166.27
7. Total Disbursements (from Line 31) .....	331199.46	2065845.10
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1208321.17	1208321.17
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	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)

Page 3

Write or Type Committee Name

Republican Party of Wisconsin

Report Covering the Period:

From:

 M M / D D / Y Y Y Y  
 09 / 01 / 2013

To:

 M M / D D / Y Y Y Y  
 09 / 30 / 2013
**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).....	54154.00	440489.00
(ii) Unitemized .....	109665.07	866130.97
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	163819.07	1306619.97
(b) Political Party Committees .....	20550.00	67300.00
(c) Other Political Committees (such as PACs).....	7500.00	61494.03
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	191869.07	1435414.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
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).....	2573.63	142252.01
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	251.68
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	194442.70	1577917.69
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	194442.70	1577917.69

**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 .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	213431.38	1222509.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	213431.38	1222509.25
22. Transfers to Affiliated/Other Party Committees.....	0.00	95000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	1915.03
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 .....	0.00	10000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	10000.00
29. Other Disbursements .....	50000.00	50000.00
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 .....	67768.08	686420.82
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	67768.08	686420.82
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	331199.46	2065845.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	331199.46	2065845.10

**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) .....	191869.07	1435414.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	10000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	191869.07	1425414.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	213431.38	1222509.25
37. Offsets to Operating Expenditures (from Line 15, page 3).....	2573.63	142252.01
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	210857.75	1080257.24

# **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)

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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. MRS. MARION J. ADLER**

Mailing Address 10200 W BLUEMOUND ROAD

City State Zip Code  
MILWAUKEE WI 53226-4356

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 / 2013

Transaction ID : SA11.886411

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. RALPH AMOS**

Mailing Address 9120 NORTH COUNTY ROAD 925 WEST

City State Zip Code  
ALEXANDRIA IN 46001-9363

FEC ID number of contributing  
federal political committee.

C

Name of Employer

R & R ENGINEERING COMPANY

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 19 / 2013

Transaction ID : SA11.886372

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. IRENE M. AYERS**

Mailing Address 10200 W BLUEMOUND RD. APT. 308

City State Zip Code  
MILWAUKEE WI 53226-4373

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 / 16 / 2013

Transaction ID : SA11.885506

Amount of Each Receipt this Period

100.00

CONTRIBUTION

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

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

400.00

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

Use separate schedule(s)  
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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. JEANNE S. BARNES**

Mailing Address 165 CHRISTOPHER STREET  
APT 6 CC

City State Zip Code  
NEW YORK NY 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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 25 / 2013

Transaction ID : SA11.887081

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. JOHN H. BARRETTE**

Mailing Address 930 - 25TH PLACE

City State Zip Code  
WISCONSIN RAPIDS WI 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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 16 / 2013

Transaction ID : SA11.885631

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MARGARET H. BAUMANN**

Mailing Address 7860 N PHEASANT LANE

City State Zip Code  
MILWAUKEE WI 53217-3016

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 / D D / Y Y Y Y Y  
09 / 19 / 2013

Transaction ID : SA11.886350

Amount of Each Receipt this Period

100.00

CONTRIBUTION

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

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

250.00

# **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. HAROLD D. BEALS**

Mailing Address 475 N HICKORY STREET

City

PLATTEVILLE

State

WI

Zip Code

53818-4001

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 ▼

425.00

Date of Receipt

09 / 16 / 2013

Transaction ID : SA11.885564

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. J STEVEN BERGERSON**

Mailing Address 415 S WELLS STREET # 102

City

LAKE GENEVA

State

WI

Zip Code

53147-2116

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 / 06 / 2013

Transaction ID : SA11.885055

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. MR. RICHARD BLOMQUIST**

Mailing Address 1660 N. PROSPECT AVE APT 28

City

MILWAUKEE

State

WI

Zip Code

53202-2400

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BLOMQUIST BENEFITS CONSULTING

Occupation

HEALTH CARE CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 27 / 2013

Transaction ID : SA11.887972

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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

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

750.00



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

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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. DUANE H. BLUEMKE**

Mailing Address 4585 HEWITTS PT RD

City

OCONOMOWOC

State

WI

Zip Code

53066-3314

FEC ID number of contributing  
federal political committee.

C

Name of Employer

U. S. COUNSELING SERVICES

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 27 / 2013

**Transaction ID : SA11.887975**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. WALTER BOHRER**

Mailing Address 34100 SUNSET DRIVE

City

OCONOMOWOC

State

WI

Zip Code

53066-9267

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 / 16 / 2013

**Transaction ID : SA11.885949**

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. DOUGLAS BORCHERDT**

Mailing Address 2368 WEST HIGHWAY G

City

MERCER

State

WI

Zip Code

54547-9100

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 / 25 / 2013

**Transaction ID : SA11.886795**

Amount of Each Receipt this Period

150.00

CONTRIBUTION

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

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

1200.00

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

Use separate schedule(s)  
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FOR LINE NUMBER:  
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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. WILLIAM O. BRACHMAN**

Mailing Address 10101 CEDARCREEK RD

City

CEDARBURG

State

WI

Zip Code

53012-9757

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

09 / 03 / 2013

**Transaction ID : SA11.884788**

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. ROBIN BRADFORD**

Mailing Address 1463 SW COLUMBIA WAY

City

VANCOUVER

State

WA

Zip Code

98661-3818

FEC ID number of contributing  
federal political committee.

C

Name of Employer

REALVEST CORPORATION

Occupation

ASSISTANT TO FOUNDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 09 / 2013

**Transaction ID : SA11.885188**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. JOHN B. BROCK III**

Mailing Address 5603 INDIAN CIRCLE

City

HOUSTON

State

TX

Zip Code

77056-1006

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 / 17 / 2013

**Transaction ID : SA11.886431**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

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

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

1300.00

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 11 OF 102

(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. SHERRY LEE CALKINS

Mailing Address P.O. BOX 115

City

LILY DALE

State

NY

Zip Code

14752-0115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PSYCHIC MEDIUM

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 25 / 2013

Transaction ID : SA11.887144

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. SUE M. CANNON

Mailing Address 6420 WEST LAKERIDGE ROAD

City

LAKEWOOD

State

CO

Zip Code

80227-3909

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 23 / 2013

Transaction ID : SA11.887120

Amount of Each Receipt this Period

450.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. DAVID W. CARSTENS

Mailing Address 1221 TENNY AVENUE

City

WAUKESHA

State

WI

Zip Code

53186-6650

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2013

Transaction ID : SA11.886181

Amount of Each Receipt this Period

50.00

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 PageFOR LINE NUMBER:  
(check only one)

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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. THOMAS J. CASSIDY**

Mailing Address 10200 WEST BLUEMOUND ROAD, APT 102

City	State	Zip Code
MILWAUKEE	WI	53226-4370

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	/	19	/	2013

Transaction ID : SA11.886187

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. WALTER H. CLAIBORNE III**

Mailing Address 14217 CLAIBORNE ROAD

City	State	Zip Code
BATCHELOR	LA	70715-3514

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2013

Transaction ID : SA11.886803

Amount of Each Receipt this Period

200.00

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

UNEMPLOYED

Occupation

UNEMPLOYED

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	/	11	/	2013

Transaction ID : SA11.885229

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

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

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

2750.00

# **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. JENNIFER CLEMENTS**

Mailing Address 108 MAIN STREET

City  
GENOA

State  
WI

Zip Code  
54632-8877

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CAPTAIN HOOKS BAIT & TACKLE

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

09 / 18 / 2013

Transaction ID : SA11.886190

Amount of Each Receipt this Period

60.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. DAVID U. COOKSON M.D.**

Mailing Address 4910 LAKE MENDOTA DRIVE

City  
MADISON

State  
WI

Zip Code  
53705-1376

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 / 16 / 2013

Transaction ID : SA11.885536

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. JOSEPH CORSO**

Mailing Address 116 HOWARD STREET

City  
RIVERTON

State  
NJ

Zip Code  
08077-1164

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 23 / 2013

Transaction ID : SA11.886865

Amount of Each Receipt this Period

150.00

CONTRIBUTION

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

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

460.00

# **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. KAREN E. COWAN**

Mailing Address 2680 HUMBOLDT ROAD, APT 1

City  
GREEN BAY

State Zip Code  
WI 54311-5768

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 / 12 / 2013

Transaction ID : SA11.885132

Amount of Each Receipt this Period

60.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. ROBERT COWEN**

Mailing Address 9617 N. JUNIPER CIR

City  
MEQUON

State Zip Code  
WI 53092-6215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BADGER ALLOYS, INC

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 20 / 2013

Transaction ID : SA11.887100

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. FRANK J. COYNE JR.**

Mailing Address 41 GORWIN DRIVE

City  
HANSON

State Zip Code  
MA 02341-1309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SHAW'S SUPERMARKET

Occupation

GROCERY CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

09 / 19 / 2013

Transaction ID : SA11.886300

Amount of Each Receipt this Period

50.00

CONTRIBUTION

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

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

360.00

# **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. HARRY DAHL**

Mailing Address 25121 MALLARD ROAD

City  
SPARTA

State  
WI

Zip Code  
54656-3705

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DAHL AUTOMOTIVE

Occupation  
AUTO DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 12 / 2013

**Transaction ID : SA11.885930**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. CAROLYN DAMON**

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 ▼

235.00

Date of Receipt

09 / 03 / 2013

**Transaction ID : SA11.884789**

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. MR. RUSS M. DARROW JR.**

Mailing Address 4664 CEDAR PARK DRIVE

City  
WEST BEND

State  
WI

Zip Code  
53095-9147

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RUSS DARROW GROUP

Occupation  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 20 / 2013

**Transaction ID : SA11.887167**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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

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

800.00

# **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. RICHARD DOLIGALSKI**

Mailing Address 2143 SPRINGBROOK SOUTH

City

WAUKESHA

State

WI

Zip Code

53186-1225

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 / 30 / 2013

Transaction ID : SA11.887664

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. 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 ▼

220.00

Date of Receipt

09 / 18 / 2013

Transaction ID : SA11.886607

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. WILMA EDWARDS**

Mailing Address P.O. BOX 2948

City

DEL MAR

State

CA

Zip Code

92014-5948

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 / 27 / 2013

Transaction ID : SA11.887631

Amount of Each Receipt this Period

200.00

CONTRIBUTION

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

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

275.00



# **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. JOSEPH S. ELLIS**

Mailing Address 3205 N MARIETTA AVENUE APT B

City State Zip Code  
MILWAUKEE WI 53211-3133

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 / 18 / 2013

Transaction ID : SA11.886639

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. CHESLEY P. ERWIN**

Mailing Address 712 WOODRIDGE DRIVE

City State Zip Code  
MANITOWOC WI 54220-8982

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

09 / 17 / 2013

Transaction ID : SA11.886580

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. CHESLEY P. ERWIN**

Mailing Address 712 WOODRIDGE DRIVE

City State Zip Code  
MANITOWOC WI 54220-8982

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

09 / 27 / 2013

Transaction ID : SA11.887719

Amount of Each Receipt this Period

25.00

CONTRIBUTION

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

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

300.00

# **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. NATALIE GAYLORD**

Mailing Address 5112 N WILKINSON ROAD

City State Zip Code  
 PARADISE VALLEY AZ 85253-6966

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 ▼

300.00

Date of Receipt

09 / 16 / 2013

Transaction ID : SA11.885987

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. NATALIE GAYLORD**

Mailing Address 5112 N WILKINSON ROAD

City State Zip Code  
 PARADISE VALLEY AZ 85253-6966

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 ▼

300.00

Date of Receipt

09 / 30 / 2013

Transaction ID : SA11.887994

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. CHRISTIAN GERLACH**

Mailing Address 3990 SOUTH STONEWOOD ROAD

City State Zip Code  
 NEW BERLIN WI 53151-6192

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LAKESIDE STEEL & MANUFACTURING COM

Occupation

VICE PRESIDENT OF OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 03 / 2013

Transaction ID : SA11.884700

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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

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

800.00

# **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. RICHARD A. GRAHAM**

Mailing Address 12725 TAHOSA LANE

City State Zip Code  
 COLORADO SPRINGS CO 80908-3220

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 / 18 / 2013

Transaction ID : SA11.886453

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. WILLIAM W. GREAVES**

Mailing Address 8851 N BAYSIDE DR

City State Zip Code  
 BAYSIDE WI 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 ▼

600.00

Date of Receipt

09 / 03 / 2013

Transaction ID : SA11.884713

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. WILLIAM W. GREAVES**

Mailing Address 8851 N BAYSIDE DR

City State Zip Code  
 BAYSIDE WI 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 ▼

600.00

Date of Receipt

09 / 18 / 2013

Transaction ID : SA11.886616

Amount of Each Receipt this Period

100.00

CONTRIBUTION

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

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

800.00

# **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. JO ANN L. GREB**

Mailing Address 8861 WEST WILSON BAY DRIVE

City  
HAYWARD

State Zip Code  
WI 54843-5221

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 / 2013

Transaction ID : SA11.886321

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. IVAN J. GRUETZMACHER**

Mailing Address E8791 GRUETZMACHER RD

City  
NEW LONDON

State Zip Code  
WI 54961-8764

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

09 / 16 / 2013

Transaction ID : SA11.885710

Amount of Each Receipt this Period

110.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. SALLY A. GUSTMAN**

Mailing Address 2797 FOX RUN

City  
APPLETON

State Zip Code  
WI 54914-8729

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 / 23 / 2013

Transaction ID : SA11.886860

Amount of Each Receipt this Period

150.00

CONTRIBUTION

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

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

1260.00

# **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. JAMES E. HALL

Mailing Address P.O. BOX 10666

City  
MIDLAND

State  
TX

Zip Code  
79702-7666

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

OIL AND GAS OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2013

Transaction ID : SA11.886319

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. BARBARA HANSEN

Mailing Address 325 INVERNESS DRIVEQ

City  
CARY

State  
IL

Zip Code  
60013-

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 09 / 2013

Transaction ID : SA11.885307

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. MS. KATHERINE M. HANSEN

Mailing Address 4210 WEST TWIN OAKS PLACE

City  
BROKEN ARROW

State  
OK

Zip Code  
74011-1392

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  
09 / 20 / 2013

Transaction ID : SA11.887112

Amount of Each Receipt this Period

100.00

CONTRIBUTION

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

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

850.00

# **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. DONALD R. HEMBRE**

Mailing Address 8191 SOUTHPARK LANE, SUITE 210

City  
LITTLETON

State Zip Code  
CO 80120-4641

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

GEOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 25 / 2013

Transaction ID : SA11.886787

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. RALPH HINGISS**

Mailing Address 117 NORTH 74TH STREET

City  
MILWAUKEE

State Zip Code  
WI 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 ▼

300.00

Date of Receipt

09 / 17 / 2013

Transaction ID : SA11.886588

Amount of Each Receipt this Period

175.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. JAMES J. HRUSKA**

Mailing Address 9021 S 83RD COURT

City  
HICKORY HILLS

State Zip Code  
IL 60457-1419

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 ▼

355.00

Date of Receipt

09 / 19 / 2013

Transaction ID : SA11.886198

Amount of Each Receipt this Period

110.00

CONTRIBUTION

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

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

535.00

# **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. DONALD R. HULMES**

Mailing Address 2512 WAYNESBOROUGH CT

City

MACUNGIE

State

PA

Zip Code

18062-1471

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 / 18 / 2013

Transaction ID : SA11.886443

Amount of Each Receipt this Period

45.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MRS. ELIZABETH E. INGERSOLL**

Mailing Address P.O. BOX 95

City

PLAINFIELD

State

WI

Zip Code

54966-0095

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 / 24 / 2013

Transaction ID : SA11.887189

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. KENNETH E. JONES**

Mailing Address 22495 CABRILLO HWY. SOUTH

City

HALF MOON BAY

State

CA

Zip Code

94019-2571

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GLOBE WIRELESS

Occupation

CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 26 / 2013

Transaction ID : SA11.887756

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

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

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

1095.00

# **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. RAMESH KAPUR**

Mailing Address 714 S HILLS DR

City  
PLYMOUTH

State Zip Code  
WI 53073-4063

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KAPUR AND ASSOCIATES

Occupation  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 27 / 2013

**Transaction ID : SA11.887970**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. MR. STEVEN B. KAUFMAN**

Mailing Address 1405 TIERNEY DRIVE

City  
WAUNAKEE

State Zip Code  
WI 53597-2331

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 ▼

250.00

Date of Receipt

09 / 17 / 2013

**Transaction ID : SA11.886572**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. NANCY E. KAYS**

Mailing Address 2231 N INDIAN HILL BOULEVARD

City  
CLAREMONT

State Zip Code  
CA 91711-1727

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYED

Occupation  
SMALL BUSINESS ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

09 / 04 / 2013

**Transaction ID : SA11.884750**

Amount of Each Receipt this Period

53.00

CONTRIBUTION

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

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

553.00



# **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. FRANCES E. KING**

Mailing Address 599 BRAYBARTON BOULEVARD

City State Zip Code  
STEUBENVILLE OH 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 ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 20 / 2013

Transaction ID : SA11.886891

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. STEPHEN KING**

Mailing Address 3508 N EDGEWOOD DRIVE

City State Zip Code  
JANESVILLE WI 53545-9547

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING CAPITAL, LLC

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 16 / 2013

Transaction ID : SA11.885813

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. 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

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 16 / 2013

Transaction ID : SA11.885579

Amount of Each Receipt this Period

70.00

CONTRIBUTION

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

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

5570.00

# **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. RANDALL S. KNOX**

Mailing Address 28 MILWAUKEE AVENUE WEST

City State Zip Code  
 FORT ATKINSON WI 53538-2018

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 W D HOARD & SONS

Occupation  
 VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 / 12 / 2013

**Transaction ID : SA11.885113**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. JOHN KOSS**

Mailing Address 1492 W CALUMET COURT RIVER FALLS

City State Zip Code  
 WI 53

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 KOSS CORPORATION

Occupation  
 CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 / 25 / 2013

**Transaction ID : SA11.887361**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. BERNARD KUBALE**

Mailing Address P.O. BOX 544

City State Zip Code  
 MERTON WI 53056-0544

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  
 09 / 27 / 2013

**Transaction ID : SA11.887723**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

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

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

2250.00

# **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. KARL LANGKAMP**

Mailing Address 10725 N 151ST EAST AVENUE

City State Zip Code  
OWASSO OK 74055-6184

FEC ID number of contributing  
federal political committee.

C

Name of Employer

B P PIPELINES

Occupation

PIPELINE CONTROLLER SHIFT LEAD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 04 / 2013

Transaction ID : SA11.884662

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. MRS. PATRICIA J. LARSON**

Mailing Address W148 N7739 MENOMONEE MANOR DRIVE

City State Zip Code  
MENOMONEE FALLS WI 53051-4229

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 / 04 / 2013

Transaction ID : SA11.884540

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. JON MICHAEL LAUER**

Mailing Address PO BOX 685

City State Zip Code  
ELM GROVE WI 53122-0685

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MGIF

Occupation

CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 18 / 2013

Transaction ID : SA11.886412

Amount of Each Receipt this Period

150.00

CONTRIBUTION

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

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

550.00

# **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. ELEANOR LEE**

Mailing Address 1930 W RIVER BEND COURT # 117

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 ▼

400.00

Date of Receipt

09 / 26 / 2013

Transaction ID : SA11.887901

Amount of Each Receipt this Period

400.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. 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 ▼

325.00

Date of Receipt

09 / 27 / 2013

Transaction ID : SA11.887736

Amount of Each Receipt this Period

75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. WAYNE LOVE**

Mailing Address 67 BEES CREEK ROAD

City

MISSOURI CITY

State

TX

Zip Code

77459-6735

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SPECIALTIES COMPANY

Occupation

SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 11 / 2013

Transaction ID : SA11.886021

Amount of Each Receipt this Period

250.00

CONTRIBUTION

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

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

725.00

# **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. MR. JAMES T. LUNDBERG**

Mailing Address 1036 EASTHILL PLACE

City  
WAUSAU

State  
WI

Zip Code  
54403-9222

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 / 2013

Transaction ID : SA11.885344

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. RICHARD LYNCH**

Mailing Address 1230 E COURTLAND PLACE

City

MILWAUKEE

State

WI

Zip Code

53211-1163

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 ▼

10000.00

Date of Receipt

09 / 17 / 2013

Transaction ID : SA11.886626

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. HENRY MADLEY**

Mailing Address 3648 62ND AVE. EAST

City

BRADENTON

State

FL

Zip Code

34203-5429

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 / 24 / 2013

Transaction ID : SA11.887489

Amount of Each Receipt this Period

200.00

CONTRIBUTION

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

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

10300.00

# **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. RICHARD C. MARX**

Mailing Address P.O. BOX 440

City

WAPPINGERS FALLS

State

NY

Zip Code

12590-0440

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 / 24 / 2013

**Transaction ID : SA11.887023**

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. BARBARA MC DONALD**

Mailing Address 1809 HAWTHORN DRIVE

City

RICHMOND

State

TX

Zip Code

77469-4821

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 / 09 / 2013

**Transaction ID : SA11.885288**

Amount of Each Receipt this Period

20.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. KAREN K. MC DONALD**

Mailing Address 711 GARRISON CT.

City

DELAFIELD

State

WI

Zip Code

53018-2019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

YMCA WAUKESHA

Occupation

DANCE TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 23 / 2013

**Transaction ID : SA11.886879**

Amount of Each Receipt this Period

100.00

CONTRIBUTION

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

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

220.00

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

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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. LEE J. MCCONAGHY

Mailing Address 2717 SEVILLE BLVD

City

CLEARWATER

State

FL

Zip Code

33764-1163

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9				2				0	1	3	

Transaction ID : SA11.886852

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. PATRICIA MCDERMOTT

Mailing Address PO BOX 98

City

WASCOTT

State

WI

Zip Code

54890-0098

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9				1	6			2	0	1	3

Transaction ID : SA11.885603

Amount of Each Receipt this Period

70.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. WILLIAM M. MCDERMOTT

Mailing Address 174 QUEEN STREET, UNIT 3A

City

FALMOUTH

State

MA

Zip Code

02540-3222

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9				1	8			2	0	1	3

Transaction ID : SA11.886211

Amount of Each Receipt this Period

100.00

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**

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. KAY A. MCDONALD**

Mailing Address 1898 HENDERSHOT ROAD

City

PARMA

State

MI

Zip Code

49269-9793

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 ▼

300.00

Date of Receipt

09 / 19 / 2013

Transaction ID : SA11.886112

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. STEVE MCGUIRE**

Mailing Address 2810 EAST MENLO BLVD.

City

MILWAUKEE

State

WI

Zip Code

53211-2652

FEC ID number of contributing  
federal political committee.

C

Name of Employer

US BANK

Occupation

BANKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 24 / 2013

Transaction ID : SA11.887499

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. R M M. MILLER**

Mailing Address 7467 CARTER CIRCLE N

City

FRANKLIN

State

WI

Zip Code

53132-8122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MASTER ENTERPRISES

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 16 / 2013

Transaction ID : SA11.885919

Amount of Each Receipt this Period

100.00

CONTRIBUTION

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

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

900.00



# **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. 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  
 CLAN MONTGOMERY SOCIETY

Occupation  
 VICE PRESIDENT

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 2013

Transaction ID : SA11.886918

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. STEVEN M. MOORE

Mailing Address 5910 NORTH MONROE AVENUE

City State Zip Code  
 FRESNO CA 93723-9309

FEC ID number of contributing federal political committee.

C

Name of Employer  
 STEVE MOORE RANCH

Occupation  
 FARMER

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 27 2013

Transaction ID : SA11.887668

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. 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  
 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 2013

Transaction ID : SA11.887602

Amount of Each Receipt this Period

50.00

CONTRIBUTION

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

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

700.00

# **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. LYNN MOYER**

Mailing Address 2767 INDIAN HILL DR

City  
GREEN BAY

State  
WI

Zip Code  
54313-4947

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 30 / 2013

Transaction ID : SA11.888016

Amount of Each Receipt this Period

500.00

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

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

09 / 18 / 2013

Transaction ID : SA11.886057

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. MARY M. NEWTON**

Mailing Address 607 EAST TAYLORE RUN PARKWAY

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 ▼

800.00

Date of Receipt

09 / 23 / 2013

Transaction ID : SA11.887145

Amount of Each Receipt this Period

200.00

CONTRIBUTION

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

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

850.00

# **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. EDITH M. NOWICKI**

Mailing Address 20 DEWEY STREET

City  
SAINT PAUL

State Zip Code  
MN 55104-5950

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 / 16 / 2013

Transaction ID : SA11.885741

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. EDITH M. NOWICKI**

Mailing Address 20 DEWEY STREET

City  
SAINT PAUL

State Zip Code  
MN 55104-5950

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 / 27 / 2013

Transaction ID : SA11.887582

Amount of Each Receipt this Period

60.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. PATRICIA OKRAY**

Mailing Address 2801 RAINBOW DRIVE

City  
PLOVER

State Zip Code  
WI 54467-2551

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 ▼

255.00

Date of Receipt

09 / 06 / 2013

Transaction ID : SA11.884850

Amount of Each Receipt this Period

55.00

CONTRIBUTION

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

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

165.00

# **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. JOHN OLSON**

Mailing Address 31 CENTRAL SQUARE

City  
LYNN

State  
MA

Zip Code  
01901-1308

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COLUMBIA INSURANCE AGENCY, INC

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 09 / 2013

Transaction ID : SA11.885228

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. JAYANT PATEL**

Mailing Address 9142 SOLON DRIVE

City

CINCINNATI

State

OH

Zip Code

45242-4616

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 ▼

201.00

Date of Receipt

09 / 24 / 2013

Transaction ID : SA11.887221

Amount of Each Receipt this Period

201.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. ROBERT D. PERLICK**

Mailing Address 1405 WOODLAWN CIRCLE

City

ELM GROVE

State

WI

Zip Code

53122-1644

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 / 18 / 2013

Transaction ID : SA11.886046

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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

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

1201.00

# **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. DONALD G. REINHARD**

Mailing Address 75 HARVARD AVENUE

City

PALMERTON

State

PA

Zip Code

18071-1212

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PENCOR SERVICES

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 23 / 2013

Transaction ID : SA11.887164

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MARHEW RENO**

Mailing Address P.O. BOX 399

City

GILLETTE

State

WY

Zip Code

82717-0399

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FLOYD C RENO & SONS, INC

Occupation

RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 04 / 2013

Transaction ID : SA11.884784

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. ANTHONY R. ROBERTS**

Mailing Address 1339 HILLWOOD BOULEVARD  
UNIT F

City

PEWAUKEE

State

WI

Zip Code

53072-6515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DIRECT SUPPLY, INC

Occupation

PROGRAMMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 18 / 2013

Transaction ID : SA11.886487

Amount of Each Receipt this Period

75.00

CONTRIBUTION

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

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

825.00

# **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. ELPIDA RUIZ**

Mailing Address 182 W GLENGATE AVENUE

City State Zip Code  
CHICAGO HEIGHTS IL 60411-1754

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  
09 / 04 / 2013

**Transaction ID : SA11.884659**

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. JOHN SCEPANSKI**

Mailing Address 45 E MORGAN AVENUE

City State Zip Code  
MILWAUKEE WI 53207-

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 ▼

1025.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 16 / 2013

**Transaction ID : SA11.885478**

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. HELEN SCHLEY**

Mailing Address 107 OAK MEADOWS LN.

City State Zip Code  
NASHVILLE TN 37215-3434

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 / D D / Y Y Y Y Y  
09 / 06 / 2013

**Transaction ID : SA11.884891**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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

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

1100.00

# **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. MR. ELDER ROY SCHOENROCK**

Mailing Address 538 W 15TH AVENUE

City

OSHKOSH

State

WI

Zip Code

54902-6546

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

TAX ACCNT.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

09 / 06 / 2013

Transaction ID : SA11.884902

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. KAMALA SINGH**

Mailing Address 16325 SHAGBARK LN

City

BROOKFIELD

State

WI

Zip Code

53005-1030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

K SINGH & ASSOCIATES

Occupation

CONSULTING ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 27 / 2013

Transaction ID : SA11.887971

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. ROBERT SPINSKY**

Mailing Address N76 W14501 NORTHPOINT COURT

City

MENOMONEE FALLS

State

WI

Zip Code

53051-4319

FEC ID number of contributing  
federal political committee.

C

Name of Employer

W L GORE & ASSOCIATES

Occupation

SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 18 / 2013

Transaction ID : SA11.886367

Amount of Each Receipt this Period

300.00

CONTRIBUTION

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

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

900.00

# **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. MR. STERLING F. STRAUSE**

Mailing Address N5389 LILY PAD LANE

City

WILD ROSE

State

WI

Zip Code

54984-9021

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 / 12 / 2013

Transaction ID : SA11.885917

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. GEORGE B. SUTER**

Mailing Address 2580 GREENWOOD ACRES DRIVE

City

DEKALB

State

IL

Zip Code

60115-4913

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 / 18 / 2013

Transaction ID : SA11.886594

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. ANNE T. SYNNESTVEDT**

Mailing Address P.O. BOX 334

City

BRYN ATHYN

State

PA

Zip Code

19009-0334

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 / 27 / 2013

Transaction ID : SA11.887586

Amount of Each Receipt this Period

100.00

CONTRIBUTION

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

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

700.00



# **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. FRED L. TUCKER**

Mailing Address 25 TALLEY LANE

City

ROSSVILLE

State

GA

Zip Code

30741-5401

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 / 23 / 2013

Transaction ID : SA11.886910

Amount of Each Receipt this Period

80.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR. FRANK T. TYLLA**

Mailing Address 3712 SPRUCE STREET

City

RACINE

State

WI

Zip Code

53403-3776

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 / 04 / 2013

Transaction ID : SA11.884767

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. DAVID VAN DYKE**

Mailing Address 55385 HANSEN LANE

City

VIROQUA

State

WI

Zip Code

54665-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PSYCHIATRIC ASSOCIATES

Occupation

PSYCHIATRIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

09 / 27 / 2013

Transaction ID : SA11.887687

Amount of Each Receipt this Period

100.00

CONTRIBUTION

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

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

280.00

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

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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. MATTHEW VANDERKOP**

Mailing Address 1704 PARKSIDE DR.

City  
PASADENA

State  
TX

Zip Code  
77502-5412

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

09 / 24 / 2013

Transaction ID : SA11.887490

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MATTHEW VANDERKOP**

Mailing Address 1704 PARKSIDE DR.

City  
PASADENA

State  
TX

Zip Code  
77502-5412

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

09 / 27 / 2013

Transaction ID : SA11.887716

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR. IRVIN VOLLERT**

Mailing Address 1620 RIVERWOOD LN

City  
WISCONSIN RAPIDS

State  
WI

Zip Code  
54494-4749

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 / 12 / 2013

Transaction ID : SA11.885136

Amount of Each Receipt this Period

150.00

CONTRIBUTION

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

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

750.00

# **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. 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 ▼

210.00

Date of Receipt

09 / 23 / 2013

Transaction ID : SA11.887046

Amount of Each Receipt this Period

60.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. YASH P. WADHWA**

Mailing Address 920 WEST BRENTWOOD LANE

City

MILWAUKEE

State

WI

Zip Code

53217-4115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LARSEN ENGINEERS, S.C.

Occupation

DIRECTOR OF OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 27 / 2013

Transaction ID : SA11.887973

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. HARRY L. WALLACE**

Mailing Address 2204 WEST CHARTER MALL

City

MEQUON

State

WI

Zip Code

53092-5451

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 / 16 / 2013

Transaction ID : SA11.885711

Amount of Each Receipt this Period

600.00

CONTRIBUTION

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

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

1160.00

# **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. MICHAEL R. WALLER**

Mailing Address 6 PICARDY HILL DRIVE

City

CHESTERFIELD

State

MO

Zip Code

63017-7127

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 ▼

2100.00

Date of Receipt

09 / 23 / 2013

Transaction ID : SA11.887193

Amount of Each Receipt this Period

450.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. SUMIE Y. WARD**

Mailing Address P.O. BOX 78

City

PENRYN

State

CA

Zip Code

95663-0078

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INSTRUCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

09 / 25 / 2013

Transaction ID : SA11.886907

Amount of Each Receipt this Period

450.00

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 ▼

375.00

Date of Receipt

09 / 20 / 2013

Transaction ID : SA11.886913

Amount of Each Receipt this Period

200.00

CONTRIBUTION

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

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

1100.00

# **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. MR. FRANK V. WEILER**

Mailing Address N4926 BRENTWOOD WAY

City

MONTELLO

State

WI

Zip Code

53949-8649

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 / 2013

Transaction ID : SA11.886132

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MARION WELLS**

Mailing Address 2100 S OCEAN DR. APT. 4G

City

FORT LAUDERDALE

State

FL

Zip Code

33316-3842

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 / 06 / 2013

Transaction ID : SA11.884970

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. FREDDIE K. WHEELER**

Mailing Address 931 OXFORD DRIVE

City

LOS ALTOS

State

CA

Zip Code

94024-7033

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 ▼

400.00

Date of Receipt

09 / 18 / 2013

Transaction ID : SA11.886126

Amount of Each Receipt this Period

200.00

CONTRIBUTION

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

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

650.00

# **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. 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 ▼

205.00

Date of Receipt

09 / 19 / 2013

Transaction ID : SA11.886464

Amount of Each Receipt this Period

75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. SAMUEL J. WIEGAND**

Mailing Address 6584 CHAMPETRE COURT

City  
RENO

State  
NV

Zip Code  
89511-5077

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 / 23 / 2013

Transaction ID : SA11.887004

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MS. SUSAN L. WILKEY**

Mailing Address 5112 N HWY 83

City  
HARTLAND

State  
WI

Zip Code  
53029-9306

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 ▼

5000.00

Date of Receipt

09 / 16 / 2013

Transaction ID : SA11.885814

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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

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

5575.00

# **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. CLAY WILLMAN**

Mailing Address 1533 GOLF VIEW DR. E

City

SHEBOYGAN

State

WI

Zip Code

53083-3461

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WILLMAN INDUSTRIES, INC

Occupation

OWNER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

09 / 24 / 2013

Transaction ID : SA11.887129

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. GUSTAV WIRTH JR.**

Mailing Address N48W6100 SPRING STREET

City

CEDARBURG

State

WI

Zip Code

53012-2437

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DELTA SATELLITE COMPANY

Occupation

EXECUTIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 27 / 2013

Transaction ID : SA11.887974

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. ROBERT WITTENBERG**

Mailing Address 215 - 12TH STREET NW

City

VALLEY CITY

State

ND

Zip Code

58072-2154

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 16 / 2013

Transaction ID : SA11.885742

Amount of Each Receipt this Period

50.00

CONTRIBUTION

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

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

1550.00

# **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. DANIEL L. WOJCIK**

Mailing Address W8773 CEMETERY ROAD

City  
SHARON

State  
WI

Zip Code  
53585-9000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WADDELL-WOJCIK TRUCKING

Occupation

TRUCK DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 25 / 2013

**Transaction ID : SA11.887036**

Amount of Each Receipt this Period

75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. 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 ▼

250.00

Date of Receipt

09 / 27 / 2013

**Transaction ID : SA11.887738**

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. PATRICIA A. WYSONG**

Mailing Address 2707 CLUBLAKE TRAIL

City

MCKINNEY

State

TX

Zip Code

75070-4009

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 / 2013

**Transaction ID : SA11.885294**

Amount of Each Receipt this Period

100.00

CONTRIBUTION

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

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

275.00

54154.00



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

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<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 NATIONAL COMMITTEE**

Mailing Address 310 1ST ST SE

City

WASHINGTON

State

DC

Zip Code

20003-1885

FEC ID number of contributing  
federal political committee.

C

C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

67300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 04 / 2013

Transaction ID : SA11.888605

Amount of Each Receipt this Period

20550.00

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  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

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  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

20550.00

20550.00

# **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. UNITED ASSOCIATION OF POLITICAL EDUCATION COMMITTEE**

Mailing Address THREE PARK PLACE

City State Zip Code  
 ANNAPOLIS MD 21401-3687

FEC ID number of contributing  
federal political committee.

C C00012476

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 30 2013

Transaction ID : SA11.887554

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. UNITEDHEALTH GROUP INCORPORATED PAC**

Mailing Address 9900 BREN ROAD EAST

City State Zip Code  
 MINNETONKA MN 55343-9664

FEC ID number of contributing  
federal political committee.

C C00274431

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 16 2013

Transaction ID : SA11.885468

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

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

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

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

7500.00

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

7500.00

# **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. RON JOHNSON FOR US SENATE**

Mailing Address 219 E WASHINGTON  
STE 101

City State Zip Code  
OSHKOSH WI 54901-5029

FEC ID number of contributing  
federal political committee.

**C** C00482984

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**09** / **17** / **2013**

**Transaction ID : SA11.886025**

Amount of Each Receipt this Period

1000.00

RENT REIMBURSEMENT

Full Name (Last, First, Middle Initial)

## **B. SOUTHWEST PUBLISHING & MAILING CORP**

Mailing Address 2600 NORTHWEST TOPEKA AVENUE

City State Zip Code  
TOPEKA KS 66617-1160

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1803.30

Date of Receipt

**09** / **24** / **2013**

**Transaction ID : SA11.886777**

Amount of Each Receipt this Period

1102.63

REFUND

Full Name (Last, First, Middle Initial)

## **C. USPS**

Mailing Address P.O. BOX 5066

City State Zip Code  
MILWAUKEE WI 53201-5066

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2355.00

Date of Receipt

**09** / **11** / **2013**

**Transaction ID : SA11.885096**

Amount of Each Receipt this Period

471.00

POSTAGE REIMBURSEMENT

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

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

2573.63

2573.63





**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. WESTIN BOSTON WATERFRONT**

Mailing Address 526 SUMMER ST

City BOSTON    State MA    Zip Code 02210

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  
08 / 16 / 2013

Transaction ID : SB21B.I16124

Amount of Each Disbursement this Period

510.49

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. 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 M / D D D / Y Y Y Y Y Y  
09 / 23 / 2013

Transaction ID : SB21B.I15986

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

**C. CAMPAIGN NOW**

Mailing Address 1126 S 70TH ST

City MILWAUKEE    State WI    Zip Code 53214

Purpose of Disbursement  
VOIP

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  
09 / 30 / 2013

Transaction ID : SB21B.I15979

Amount of Each Disbursement this Period

542.00

SUBTOTAL of Disbursements This Page (optional)..... ►

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

842.00

<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

Republican Party of Wisconsin

### A. CAPITAL NEWSPAPERS

1901 FISH HATCHERY ROAD

53713

Category/  
Type

☐ Primary ☐ General  
☐ Other (specify) ▼

District:

499.00

**B. CHAMPION GROUP LLC**

MM / DD / YYYY

6652 OFFSHORE DR

53705

Category/  
Type

☐ Primary ☐ General  
☐ Other (specify) ▼

District:

15000.00

### C. CHARTER - EAU CLAIRE

P.O. BOX 2981

53201

Category/  
Type

☐ Primary ☐ General  
☐ Other (specify) ▼

District:

223.14

15722.14

[illegible]





<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

Republican Party of Wisconsin

902.50

State:  District:

MM / DD / YYYY

4500.00

State:  District:

M M / D D / Y Y Y Y  
09 11 2013

315.45

State:  District:

5717.95

[illegible]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. EASY PERMIT POSTAGE PITNEY BOWES**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		11		2013

Mailing Address

P.O. BOX 371874

City

PITTSBURGH

State

PA

Zip Code

15250

Purpose of Disbursement

POSTAGE FOR METER

Candidate Name

Category/  
Type

Transaction ID : SB21B.I15999

Amount of Each Disbursement this Period

4411.51
---------

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. EASY PERMIT POSTAGE PITNEY BOWES**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2013

Mailing Address

P.O. BOX 371874

City

PITTSBURGH

State

PA

Zip Code

15250

Purpose of Disbursement

POSTAGE FOR METER

Candidate Name

Category/  
Type

Transaction ID : SB21B.I16000

Amount of Each Disbursement this Period

5169.53
---------

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. HEINZEN PRINTING INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		11		2013

Mailing Address

P.O. BOX 267

City

MARSHFIELD

State

WI

Zip Code

54449

Purpose of Disbursement

PRINTING -NOT FEA

Candidate Name

Category/  
Type

Transaction ID : SB21B.I16002

Amount of Each Disbursement this Period

514.84
--------

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

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

10095.88
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 67 OF 102

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. SCM ASSOCIATES, INC.**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	9				1	1						2	0	1	3

Mailing Address

1283 MAIN STREET

City

DUBLIN

State

NH

Zip Code

03444

Purpose of Disbursement

DIRECT MAIL -NOT FEA

Candidate Name

Category/  
Type

Transaction ID : SB21B.I15973

Amount of Each Disbursement this Period

57125.94

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. SCM ASSOCIATES, INC.**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	9				1	7						2	0	1	3

Mailing Address

1283 MAIN STREET

City

DUBLIN

State

NH

Zip Code

03444

Purpose of Disbursement

DIRECT MAIL -NOT FEA

Candidate Name

Category/  
Type

Transaction ID : SB21B.I15974

Amount of Each Disbursement this Period

3946.72

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. SCM ASSOCIATES, INC.**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	9				2	0						2	0	1	3

Mailing Address

1283 MAIN STREET

City

DUBLIN

State

NH

Zip Code

03444

Purpose of Disbursement

DIRECT MAIL -NOT FEA

Candidate Name

Category/  
Type

Transaction ID : SB21B.I15975

Amount of Each Disbursement this Period

13770.00

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)..... ►

74842.66

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 68 OF 102

<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. SCM ASSOCIATES, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2013

Mailing Address

1283 MAIN STREET

City

DUBLIN

State

NH

Zip Code

03444

Purpose of Disbursement

DIRECT MAIL -NOT FEA

Candidate Name

Category/  
Type

Transaction ID : SB21B.I15976

Amount of Each Disbursement this Period

51007.37

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. SOUTHWEST PUBLISHING & MAILING CORP**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2013

Mailing Address

2600 NW TOPEKA BLVD.

City

TOPEKA

State

KS

Zip Code

66617

Purpose of Disbursement

DIRECT MAIL -NOT FEA

Candidate Name

Category/  
Type

Transaction ID : SB21B.I15977

Amount of Each Disbursement this Period

11250.84

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. SPRINT**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2013

Mailing Address

P.O. BOX 4181

City

CAROL STREAM

State

IL

Zip Code

60197

Purpose of Disbursement

CELLPHONES

Candidate Name

Category/  
Type

Transaction ID : SB21B.I15948

Amount of Each Disbursement this Period

526.80

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

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

62785.01







<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

Republican Party of Wisconsin

## A. WE ENERGIES

231 W MICHIGAN STREET

City	State	Zip Code
MILWAUKEE	WI	53203

Transaction ID : SB21B.I16008

Purpose of Disbursement	
UTILITIES	

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

220.01

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

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

State:  District:

## B. WEST BEND MUTUAL

09 / 23 / 2013

1900 SOUTH 18TH AVE

City	State	Zip Code
WEST BEND	WI	53095

Transaction ID : SB21B.I15983

Purpose of Disbursement
INSURANCE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

10688.75

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

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

State:  District:

**C. WISC DEPT OF REVENUE - SLS TX**



P.O. BOX 930208

City	State	Zip Code
MILWAUKEE	WI	53293

Transaction ID : SB21B.I16004

Purpose of Disbursement	SALES/USE TAX
-------------------------	---------------

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

357.72

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

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

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

11266.48

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

212652.03



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 73 OF 102

<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 checked="" 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. REPUBLICAN PARTY OF WI STATE CMTE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2013

Mailing Address 148 E JOHNSON ST

City	State	Zip Code
MADISON	WI	53703

Transaction ID : SB29.I16007

Purpose of Disbursement  
TRANSFER TO LOCAL PARTY COMMITTEE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

50000.00
----------

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.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

--

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.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

--

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).....▶

50000.00
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TOTAL This Period (last page this line number only).....▶

50000.00
----------

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. DAVID J BARTZ**

Mailing Address 810 VERNON AVENUE

City	State	Zip Code
MADISON	WI	53714

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16019

Amount of Each Disbursement this Period

559.88
--------

Full Name (Last, First, Middle Initial)

**B. DAVID J BARTZ**

Mailing Address 810 VERNON AVENUE

City	State	Zip Code
MADISON	WI	53714

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16020

Amount of Each Disbursement this Period

683.34
--------

Full Name (Last, First, Middle Initial)

**C. TREVOR BLOCK**

Mailing Address N59 W26728 HIGHPOINT DRIVE

City	State	Zip Code
SUSSEX	WI	53089

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16021

Amount of Each Disbursement this Period

407.00
--------

SUBTOTAL of Disbursements This Page (optional).....▶

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

1650.22

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. MYLES BUSS**

Mailing Address N4161 COUNTY ROAD A

City	State	Zip Code
CAMBRIDGE	WI	53523

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2013

Transaction ID : SB30B.I16022

Amount of Each Disbursement this Period

982.42
--------

Full Name (Last, First, Middle Initial)

**B. ALEXANDER R COMBS**

Mailing Address 2734 CHAMBERLIAN AVE

City	State	Zip Code
MADISON	WI	53705

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	15	/	2013

Transaction ID : SB30B.I16023

Amount of Each Disbursement this Period

508.71
--------

Full Name (Last, First, Middle Initial)

**C. ALEXANDER R COMBS**

Mailing Address 2734 CHAMBERLIAN AVE

City	State	Zip Code
MADISON	WI	53705

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2013

Transaction ID : SB30B.I16024

Amount of Each Disbursement this Period

620.97
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SUBTOTAL of Disbursements This Page (optional)..... ►

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

2112.10
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 76 OF 102

<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:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	15	/	2013

Transaction ID : SB30B.I16025

Amount of Each Disbursement this Period

1103.10
---------

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  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2013

Transaction ID : SB30B.I16026

Amount of Each Disbursement this Period

1103.11
---------

Full Name (Last, First, Middle Initial)

**C. 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:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2013

Transaction ID : SB30B.I16086

Amount of Each Disbursement this Period

452.06
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SUBTOTAL of Disbursements This Page (optional).....▶

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

2658.27
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 78 OF 102

<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	State	Zip Code
PLANO	TX	75024

Purpose of Disbursement  
VOLUNTEER MEALS

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2013

Transaction ID : SB30B.I16092

Amount of Each Disbursement this Period

74.78
-------

[MEMO ITEM]

**B. RICHARD A. DICKIE**

Full Name (Last, First, Middle Initial)

Mailing Address 126 N. BLAIR ST. #1

City	State	Zip Code
MADISON	WI	53703

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16027

Amount of Each Disbursement this Period

1140.70
---------

**C. RICHARD A. DICKIE**

Full Name (Last, First, Middle Initial)

Mailing Address 126 N. BLAIR ST. #1

City	State	Zip Code
MADISON	WI	53703

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16028

Amount of Each Disbursement this Period

1135.89
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SUBTOTAL of Disbursements This Page (optional).....▶

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

2276.59

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 79 OF 102

<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. JESSE DOUGHERTY**

Mailing Address 5203 AUTUMN LEAF LANE

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

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16029

Amount of Each Disbursement this Period

1242.28
---------

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:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16030

Amount of Each Disbursement this Period

1242.29
---------

Full Name (Last, First, Middle Initial)

**C. JOSEPH FADNESS**

Mailing Address 9506 S RYAN GREEN CT

City FRANKLIN	State WI	Zip Code 53132
------------------	-------------	-------------------

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16031

Amount of Each Disbursement this Period

2307.39
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SUBTOTAL of Disbursements This Page (optional).....▶

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

4791.96
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 80 OF 102

<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. JOSEPH FADNESS**

Mailing Address 9506 S RYAN GREEN CT

City  
FRANKLINState  
WIZip Code  
53132Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16032

Amount of Each Disbursement this Period

2307.40
---------

Full Name (Last, First, Middle Initial)

**B. JAMES FLATH**

Mailing Address 3893 SERENITY LANE

City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16033

Amount of Each Disbursement this Period

505.71
--------

Full Name (Last, First, Middle Initial)

**C. JAMES FLATH**

Mailing Address 3893 SERENITY LANE

City  
OCONOMOWOCState  
WIZip Code  
53066Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16102

Amount of Each Disbursement this Period

12.00
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SUBTOTAL of Disbursements This Page (optional)..... ►

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

2825.11
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 81 OF 102

<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. PATRICK GARRETT**

Mailing Address 11507 BROOKSHIRE DR

City	State	Zip Code
ORLAND PARK	IL	60467

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16034

Amount of Each Disbursement this Period

562.01
--------

Full Name (Last, First, Middle Initial)

**B. ANDREW GOWDY**

Mailing Address W279 N5886 WALNUT GROVE DR.

City	State	Zip Code
SUSSEX	WI	53089

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16035

Amount of Each Disbursement this Period

1267.59
---------

Full Name (Last, First, Middle Initial)

**C. ANDREW GOWDY**

Mailing Address W279 N5886 WALNUT GROVE DR.

City	State	Zip Code
SUSSEX	WI	53089

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16036

Amount of Each Disbursement this Period

1267.58
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SUBTOTAL of Disbursements This Page (optional)..... ►

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

3097.18
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. BENJAMIN HEATH**

Mailing Address 5088 LANGSTON COURT

City	State	Zip Code
VIRGINIA BEACH	VA	23464

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16037

Amount of Each Disbursement this Period

1103.10
---------

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:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16038

Amount of Each Disbursement this Period

1103.11
---------

Full Name (Last, First, Middle Initial)

**C. DONNA K. HEIMBACH**

Mailing Address 3002 DIANNE DRIVE

City	State	Zip Code
MIDDLETON	WI	53562

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16039

Amount of Each Disbursement this Period

251.38
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SUBTOTAL of Disbursements This Page (optional).....▶

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

2457.59

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 83 OF 102

<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. DONNA K. HEIMBACH**

Mailing Address 3002 DIANNE DRIVE

City  
MIDDLETONState  
WIZip Code  
53562Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16040

Amount of Each Disbursement this Period

380.23
--------

Full Name (Last, First, Middle Initial)

**B. MICHAEL JADIN**

Mailing Address 2874 LOBELIA COURT

City  
GREEN BAYState  
WIZip Code  
54313Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16041

Amount of Each Disbursement this Period

1103.10
---------

Full Name (Last, First, Middle Initial)

**C. MICHAEL JADIN**

Mailing Address 2874 LOBELIA COURT

City  
GREEN BAYState  
WIZip Code  
54313Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16042

Amount of Each Disbursement this Period

1103.11
---------

SUBTOTAL of Disbursements This Page (optional)..... ►

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

2586.44
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 84 OF 102

<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. MICHAEL JADIN**

Mailing Address 2874 LOBELIA COURT

City	State	Zip Code
GREEN BAY	WI	54313

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16078

Amount of Each Disbursement this Period

135.90
--------

Full Name (Last, First, Middle Initial)

**B. MICHAEL JADIN**

Mailing Address 2874 LOBELIA COURT

City	State	Zip Code
GREEN BAY	WI	54313

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16079

Amount of Each Disbursement this Period

337.35
--------

Full Name (Last, First, Middle Initial)

**C. MILEAGE**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16080

Amount of Each Disbursement this Period

171.60
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[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ►

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

473.25
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 85 OF 102

<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	State	Zip Code
PLANO	TX	75024

Purpose of Disbursement  
VOLUNTEER MEAL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		17		2013

Transaction ID : SB30B.I16081

Amount of Each Disbursement this Period

60.14
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. PIZZA HUT**

Mailing Address 7100 CORPORATE DRIVE

City	State	Zip Code
PLANO	TX	75024

Purpose of Disbursement  
VOLUNTEER MEAL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		17		2013

Transaction ID : SB30B.I16082

Amount of Each Disbursement this Period

60.14
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. ADAM JORDAHL**

Mailing Address 5909 SANDHILL DRIVE

City	State	Zip Code
MIDDLETON	WI	53562

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16043

Amount of Each Disbursement this Period

389.00
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SUBTOTAL of Disbursements This Page (optional).....▶

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

389.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 86 OF 102

<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. BRIAN KIND**

Mailing Address 405 DORAL COURT

City	State	Zip Code
WAUNAKEE	WI	53597

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	15	/	2013

Transaction ID : SB30B.I16044

Amount of Each Disbursement this Period

641.88
--------

Full Name (Last, First, Middle Initial)

**B. BRIAN KIND**

Mailing Address 405 DORAL COURT

City	State	Zip Code
WAUNAKEE	WI	53597

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2013

Transaction ID : SB30B.I16045

Amount of Each Disbursement this Period

641.88
--------

Full Name (Last, First, Middle Initial)

**C. JOSEF LEVERATTO**

Mailing Address 16011 VIA SOLA

City	State	Zip Code
LAKE ELSINARE	CA	92530

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	15	/	2013

Transaction ID : SB30B.I16046

Amount of Each Disbursement this Period

1274.38
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SUBTOTAL of Disbursements This Page (optional)..... ►

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

2558.14
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 87 OF 102

<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. JOSEF LEVERATTO**

Mailing Address 16011 VIA SOLA

City	State	Zip Code
LAKE ELSINARE	CA	92530

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16047

Amount of Each Disbursement this Period

1274.38
---------

Full Name (Last, First, Middle Initial)

**B. JOSEF LEVERATTO**

Mailing Address 16011 VIA SOLA

City	State	Zip Code
LAKE ELSINARE	CA	92530

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16093

Amount of Each Disbursement this Period

19.50
-------

Full Name (Last, First, Middle Initial)

**C. JOSEF LEVERATTO**

Mailing Address 16011 VIA SOLA

City	State	Zip Code
LAKE ELSINARE	CA	92530

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16104

Amount of Each Disbursement this Period

50.37
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SUBTOTAL of Disbursements This Page (optional)..... ►

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

1344.25
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16105

Amount of Each Disbursement this Period

31.37
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. ALEX LEWISON**

Mailing Address 619 W MIFFLIN STREET

City State Zip Code  
MADISON WI 53703Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16048

Amount of Each Disbursement this Period

432.32
--------

Full Name (Last, First, Middle Initial)

**C. LARRY F. LOOMIS**

Mailing Address 762 BRIAR LN

City State Zip Code  
BELOIT WI 53511Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16049

Amount of Each Disbursement this Period

498.26
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SUBTOTAL of Disbursements This Page (optional)..... ►

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

930.58
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. LARRY F. LOOMIS**

Mailing Address 762 BRIAR LN

City	State	Zip Code
BELOIT	WI	53511

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16050

Amount of Each Disbursement this Period

604.68
--------

Full Name (Last, First, Middle Initial)

**B. SCOTT R. POOLE**

Mailing Address 1528 SELLERY STREET

City	State	Zip Code
MIDDLETON	WI	53562

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16051

Amount of Each Disbursement this Period

92.60
-------

Full Name (Last, First, Middle Initial)

**C. SCOTT R. POOLE**

Mailing Address 1528 SELLERY STREET

City	State	Zip Code
MIDDLETON	WI	53562

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16052

Amount of Each Disbursement this Period

170.28
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SUBTOTAL of Disbursements This Page (optional).....▶

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

867.56
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. GREG QUELLA**

Mailing Address 2209 COUNTY ROAD KK

City	State	Zip Code
MOSINEE	WI	54455

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16053

Amount of Each Disbursement this Period

982.42
--------

Full Name (Last, First, Middle Initial)

**B. GREG QUELLA**

Mailing Address 2209 COUNTY ROAD KK

City	State	Zip Code
MOSINEE	WI	54455

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16054

Amount of Each Disbursement this Period

982.41
--------

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  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16107

Amount of Each Disbursement this Period

151.86
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SUBTOTAL of Disbursements This Page (optional).....▶

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

2116.69
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16108

Amount of Each Disbursement this Period

110.16
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. PIZZA HUT**

Mailing Address 7100 CORPORATE DRIVE

City State Zip Code  
PLANO TX 75024Purpose of Disbursement  
VOLUNTEER MEAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2013

Transaction ID : SB30B.I16109

Amount of Each Disbursement this Period

23.55
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. MATTHEW RAINEY**

Mailing Address 2142 WEST MICHIGAN ST

City State Zip Code  
MILWAUKEE WI 53233Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16055

Amount of Each Disbursement this Period

1153.68
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SUBTOTAL of Disbursements This Page (optional)..... ►

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

1153.68
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. MATTHEW RAINEY**

Mailing Address 2142 WEST MICHIGAN ST

City	State	Zip Code
MILWAUKEE	WI	53233

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16056

Amount of Each Disbursement this Period

1153.69
---------

Full Name (Last, First, Middle Initial)

**B. MATTHEW RAINEY**

Mailing Address 2142 WEST MICHIGAN ST

City	State	Zip Code
MILWAUKEE	WI	53233

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16095

Amount of Each Disbursement this Period

308.44
--------

Full Name (Last, First, Middle Initial)

**C. MILEAGE**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16097

Amount of Each Disbursement this Period

176.10
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[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ►

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

1462.13
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. PIZZA HUT**

Mailing Address 7100 CORPORATE DRIVE

City	State	Zip Code
PLANO	TX	75024

Purpose of Disbursement  
VOLUNTEER MEAL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		24		2013

Transaction ID : SB30B.I16096

Amount of Each Disbursement this Period

30.79
-------

[MEMO ITEM]

**B. MATTHEW RAINEY**

Full Name (Last, First, Middle Initial)

Mailing Address 2142 WEST MICHIGAN ST

City	State	Zip Code
MILWAUKEE	WI	53233

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16111

Amount of Each Disbursement this Period

110.42
--------

**C. MILEAGE**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16112

Amount of Each Disbursement this Period

84.90
-------

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ►

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

110.42
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. BRIAN REGNART**

Mailing Address 4810 FLINT LANE

City	State	Zip Code
MADISON	WI	53714

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16057

Amount of Each Disbursement this Period

1222.76
---------

Full Name (Last, First, Middle Initial)

**B. LINDA RICHARDS**

Mailing Address 652 TOWER DRIVE

City	State	Zip Code
SUN PRAIRIE	WI	53590

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16058

Amount of Each Disbursement this Period

140.60
--------

Full Name (Last, First, Middle Initial)

**C. LINDA RICHARDS**

Mailing Address 652 TOWER DRIVE

City	State	Zip Code
SUN PRAIRIE	WI	53590

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16059

Amount of Each Disbursement this Period

179.34
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SUBTOTAL of Disbursements This Page (optional).....▶

1542.70
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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 PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. JONATHAN SCHMIEDER**

Mailing Address 3117 STRATTON WAY, APT 207

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

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16060

Amount of Each Disbursement this Period

1806.22
---------

Full Name (Last, First, Middle Initial)

**B. JONATHAN SCHMIEDER**

Mailing Address 3117 STRATTON WAY, APT 207

City MADISON	State WI	Zip Code 53719
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Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16061

Amount of Each Disbursement this Period

1806.22
---------

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:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16062

Amount of Each Disbursement this Period

166.19
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SUBTOTAL of Disbursements This Page (optional)..... ►

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

3778.63
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 96 OF 102

<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. CARL STOLTE**

Mailing Address 3519 ROMA LANE

City  
MIDDLETONState  
WIZip Code  
53562Purpose of Disbursement  
PAYROLL

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
09	/	30	/	2013

Transaction ID : SB30B.I16063

Amount of Each Disbursement this Period

215.33
--------

Full Name (Last, First, Middle Initial)

**B. SARAH THOMPSON**

Mailing Address 409 W GORHAM STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

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
09	/	15	/	2013

Transaction ID : SB30B.I16064

Amount of Each Disbursement this Period

581.97
--------

Full Name (Last, First, Middle Initial)

**C. SARAH THOMPSON**

Mailing Address 409 W GORHAM STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

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
09	/	30	/	2013

Transaction ID : SB30B.I16065

Amount of Each Disbursement this Period

698.12
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SUBTOTAL of Disbursements This Page (optional).....▶

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

1495.42
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 97 OF 102

<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. KALEB VANDER WIELE**

Mailing Address 100 TUCKER LANE

City	State	Zip Code
COATESVILLE	PA	19320

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2013

Transaction ID : SB30B.I16066

Amount of Each Disbursement this Period

982.42
--------

Full Name (Last, First, Middle Initial)

**B. KALEB VANDER WIELE**

Mailing Address 100 TUCKER LANE

City	State	Zip Code
COATESVILLE	PA	19320

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16067

Amount of Each Disbursement this Period

982.41
--------

Full Name (Last, First, Middle Initial)

**C. KALEB VANDER WIELE**

Mailing Address 100 TUCKER LANE

City	State	Zip Code
COATESVILLE	PA	19320

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16085

Amount of Each Disbursement this Period

174.48
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SUBTOTAL of Disbursements This Page (optional).....▶

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

2139.31

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 98 OF 102

<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 D. WILSON**

Mailing Address 641 W. MAIN STREET

City MADISON	State WI	Zip Code 53703
-----------------	-------------	-------------------

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2013

Transaction ID : SB30B.I16068

Amount of Each Disbursement this Period

465.30
--------

Full Name (Last, First, Middle Initial)

**B. JOSHUA D. WILSON**

Mailing Address 641 W. MAIN STREET

City MADISON	State WI	Zip Code 53703
-----------------	-------------	-------------------

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2013

Transaction ID : SB30B.I16069

Amount of Each Disbursement this Period

206.27
--------

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:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2013

Transaction ID : SB30B.I16073

Amount of Each Disbursement this Period

9181.64
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SUBTOTAL of Disbursements This Page (optional)..... ►

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

9853.21
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD PAYROLL LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2013

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Category/  
Type

Transaction ID : SB30B.I16074

Amount of Each Disbursement this Period

297.28
--------

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2013

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Category/  
Type

Transaction ID : SB30B.I16075

Amount of Each Disbursement this Period

9846.94
---------

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2013

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Category/  
Type

Transaction ID : SB30B.I16076

Amount of Each Disbursement this Period

350.09
--------

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional).....▶

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

10494.31
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 100 OF 102

<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 Y
09		15		2013

Mailing Address BOX 6164

City	State	Zip Code
INDIANAPOLIS	IN	46206-6164

Purpose of Disbursement  
EMPLOYEE SIMPLE IRA

Candidate Name

Category/  
Type

Transaction ID : SB30B.I16015

Amount of Each Disbursement this Period

98.95
-------

Office Sought:	Disbursement For:
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

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 Y
09		15		2013

Mailing Address BOX 6164

City	State	Zip Code
INDIANAPOLIS	IN	46206-6164

Purpose of Disbursement  
EMPLOYEE SIMPLE IRA

Candidate Name

Category/  
Type

Transaction ID : SB30B.I16016

Amount of Each Disbursement this Period

80.52
-------

Office Sought:	Disbursement For:
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Full Name (Last, First, Middle Initial)

**C. AMERICAN FUNDS SERVICE COMPANY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2013

Mailing Address BOX 6164

City	State	Zip Code
INDIANAPOLIS	IN	46206-6164

Purpose of Disbursement  
EMPLOYEE SIMPLE IRA

Candidate Name

Category/  
Type

Transaction ID : SB30B.I16017

Amount of Each Disbursement this Period

112.86
--------

Office Sought:	Disbursement For:
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

SUBTOTAL of Disbursements This Page (optional)..... ►

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

292.33
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 101 OF 102

<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  
INDIANAPOLISState  
INZip Code  
46206-6164Purpose of Disbursement  
EMPLOYEE SIMPLE IRA

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2013

Transaction ID : SB30B.I16018

Amount of Each Disbursement this Period

87.69
-------

Full Name (Last, First, Middle Initial)

**B. DEAN CARE**

Mailing Address P.O. BOX 673111

City  
CHICAGOState  
ILZip Code  
60695Purpose of Disbursement  
HEALTH INSURANCE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2013

Transaction ID : SB30B.I16077

Amount of Each Disbursement this Period

1015.44
---------

Full Name (Last, First, Middle Initial)

**C. DELTA DENTAL**

Mailing Address P.O. BOX 828

City  
STEVENS POINTState  
WIZip Code  
54481Purpose of Disbursement  
DENTAL INSURANCE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2013

Transaction ID : SB30B.I16012

Amount of Each Disbursement this Period

433.09
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SUBTOTAL of Disbursements This Page (optional)..... ►

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

1536.22
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