



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Strategy PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		26229.27
(b) Cash on Hand at Beginning of Reporting Period.....	26229.27	
(c) Total Receipts (from Line 19) .....	68000.00	68000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	94229.27	94229.27
7. Total Disbursements (from Line 31).....	34951.23	34951.23
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	59278.04	59278.04
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

Write or Type Committee Name

**Strategy PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	55000.00	55000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	55000.00	55000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	13000.00	13000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	68000.00	68000.00
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).....	0.00	0.00
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	0.00
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))..... ▶	68000.00	68000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	68000.00	68000.00

**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 .....	9951.23	9951.23
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	9951.23	9951.23
22. Transfers to Affiliated/Other Party Committees.....	15000.00	15000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	10000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(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	0.00
29. Other Disbursements .....	0.00	0.00
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 .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	34951.23	34951.23
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	34951.23	34951.23

**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) .....	68000.00	68000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	68000.00	68000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	9951.23	9951.23
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	9951.23	9951.23

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

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

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

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

NAME OF COMMITTEE (In Full)  
**Strategy PAC**

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

Mailing Address 2505 E. MARION STREET

City State Zip Code  
SHOREWOOD WI 53211-1732

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

Name of Employer Occupation  
FIDUCIARY MANAGEMENT , INC PRESIDENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2013  
**Transaction ID : SA11.54901**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

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

Mailing Address 6708 HILLCREST DRIVE

City State Zip Code  
WAUWATOSA WI 53213-2326

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

Name of Employer Occupation  
FIDUCIARY MANAGEMENT INC SENIOR VICE PRESIDENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 01 / 2013  
**Transaction ID : SA11.56339**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. JEFFREY H. CURLER**

Mailing Address PO BOX 669

City State Zip Code  
NEENAH WI 54957-0669

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2013  
**Transaction ID : SA11.55553**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Strategy PAC**

**A. MRS. LEA M. CURLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 669  
 City NEENAH State WI Zip Code 54957-0669  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOUSEWIFE Occupation HOUSEWIFE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2013  
**Transaction ID : SA11.55552**  
 Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

**B. MR. PATRICK J. ENGLISH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1825 N 74TH STREET  
 City MILWAUKEE State WI Zip Code 53213-2219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FIDUCIARY MANAGEMENT INC Occupation INVESTMENTS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 28 / 2013  
**Transaction ID : SA11.54899**  
 Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

**C. RACHEL A. ENGLISH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1825 N 74TH STREET  
 City MILWAUKEE State WI Zip Code 53213-2219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 28 / 2013  
**Transaction ID : SA11.54900**  
 Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 17  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Strategy PAC**

Full Name (Last, First, Middle Initial)  
**A. MR. BEN GANTHER**

Mailing Address 4825 COUNTY ROAD A

City State Zip Code  
OSHKOSH WI 54901-9618

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

Name of Employer Occupation  
GANTHER CONSTRUCTION DESIGN/BUILDER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 24 / 2013  
**Transaction ID : SA11.54874**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MRS. MARY KELLNER**

Mailing Address 5112 W HIGHLAND ROAD

City State Zip Code  
MEQUON WI 53092-1137

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

Name of Employer Occupation  
SELF PHILANTHROPIST

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 28 / 2013  
**Transaction ID : SA11.54902**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. TED KELLNER**

Mailing Address 5112 W HIGHLAND RD

City State Zip Code  
THIENSVILLE WI 53092-1137

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

Name of Employer Occupation  
FIDUCIARY MANAGEMENT, INC. ANALYST

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 28 / 2013  
**Transaction ID : SA11.54903**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15000.00

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



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

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

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

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NAME OF COMMITTEE (In Full)  
**Strategy PAC**

Full Name (Last, First, Middle Initial)  
**A. RICHARD L. WILKEY**

Mailing Address 5112 N HWY 83

City State Zip Code  
HARTLAND WI 53029-9306

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

Name of Employer Occupation  
FISHER BARTON INC CEO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 14 / 2013  
**Transaction ID : SA11.54763**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. SUSAN L. WILKEY**

Mailing Address 5112 N. HIGHWAY 83

City State Zip Code  
HARTLAND WI 53029-9306

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 14 / 2013  
**Transaction ID : SA11.54764**

Amount of Each Receipt this Period  
5000.00

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 Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	55000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Strategy PAC**

**A. CSX CORP GOOD GOVERNMENT FUND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1331 PENNSYLVANIA AVENUE NW  
 SUITE 560  
 City WASHINGTON State DC Zip Code 20004-1745  
 FEC ID number of contributing federal political committee. **C** C00163832  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 11 / 2013  
**Transaction ID : SA11.57402**  
 Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

**B. MILLER COORS LLC PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1501 M STREET NW  
 SUITE 330  
 City WASHINGTON State DC Zip Code 20005-1701  
 FEC ID number of contributing federal political committee. **C** C00457697  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 11 / 2013  
**Transaction ID : SA11.57401**  
 Amount of Each Receipt this Period  
 3000.00  
 CONTRIBUTION

**C. UNION PACIFIC CORP FUND FOR EFFECTIVE GOVERNMENT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 600 13TH STREET NW  
 SUITE 340  
 City WASHINGTON State DC Zip Code 20005-3012  
 FEC ID number of contributing federal political committee. **C** C00010470  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 22 / 2013  
**Transaction ID : SA11.56595**  
 Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	13000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	13000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Strategy PAC**

Full Name (Last, First, Middle Initial) <b>A. DAVID HAYFORD</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2013
Mailing Address 3048 SHOREWOOD DRIVE		<b>Transaction ID : SB21B.I3272</b>
City OSHKOSH	State WI	
Purpose of Disbursement ACCOUNTING & REPORTING CONSULTING		Amount of Each Disbursement this Period 1200.00
Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. DAVID A. HAYFORD</b>		Date of Disbursement MM / DD / YYYY 03 / 27 / 2013
Mailing Address 3048 SHOREWOOD DRIVE		<b>Transaction ID : SB21B.I3356</b>
City OSHKOSH	State WI	
Purpose of Disbursement ACCOUNTING & REPORTING CONSULTING		Amount of Each Disbursement this Period 1031.25
Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. DAVID A. HAYFORD</b>		Date of Disbursement MM / DD / YYYY 06 / 11 / 2013
Mailing Address 3048 SHOREWOOD DRIVE		<b>Transaction ID : SB21B.I3446</b>
City OSHKOSH	State WI	
Purpose of Disbursement ACCOUNTING & REPORTING CONSULTING		Amount of Each Disbursement this Period 1068.75
Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input 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)

**Strategy PAC**

Full Name (Last, First, Middle Initial)

**A. ARISTOTLE**

Mailing Address 205 PENNSYLVANIA AVENUE SE

City WASHINGTON State DC Zip Code 20003-1164

Purpose of Disbursement  
CAMPAIGN SOFTWARE

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 22 / 2013

**Transaction ID : SB21B.I3315**

Amount of Each Disbursement this Period

900.00

Full Name (Last, First, Middle Initial)

**B. ARISTOTLE**

Mailing Address 205 PENNSYLVANIA AVENUE SE

City WASHINGTON State DC Zip Code 20003-1164

Purpose of Disbursement  
CAMPAIGN SOFTWARE

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 20 / 2013

**Transaction ID : SB21B.I3388**

Amount of Each Disbursement this Period

900.00

Full Name (Last, First, Middle Initial)

**C. BAKER TILLY VIRCHOW KRAUSE, LLP**

Mailing Address PO BOX 7398

City MADISON State WI Zip Code 53707-7398

Purpose of Disbursement  
CONSULTING - ACCOUNTING & REPORTING

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2013

**Transaction ID : SB21B.I3314**

Amount of Each Disbursement this Period

2020.00

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

3820.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Strategy PAC**

Full Name (Last, First, Middle Initial)  
**A. BELLWETHER CONSULTING GROUP**

Date of Disbursement  
MM / DD / YYYY  
06 / 11 / 2013

Mailing Address 1150 HUNGRYNECK BOULEVARD  
SUITE C-336

City MOUNT PLEASANT State SC Zip Code 29464-3484

Purpose of Disbursement FUNDRAISING EVENT  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID : **SB21B.I3447**

Amount of Each Disbursement this Period  
591.97

Category/Type  
003

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

Date of Disbursement  
MM / DD / YYYY  
01 / 22 / 2013

Mailing Address 1593 SPRING HILL ROAD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement CAMPAIGN SOFTWARE  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID : **SB21B.I3316**

Amount of Each Disbursement this Period  
250.00

Category/Type  
001

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

Date of Disbursement  
MM / DD / YYYY  
02 / 15 / 2013

Mailing Address 1593 SPRING HILL ROAD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement CAMPAIGN SOFTWARE  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID : **SB21B.I3320**

Amount of Each Disbursement this Period  
160.00

Category/Type  
001

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1001.97

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Strategy PAC**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 SPRING HILL ROAD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
CAMPAIGN SOFTWARE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 20 / 2013

**Transaction ID : SB21B.I3338**

Amount of Each Disbursement this Period

160.00

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 SPRING HILL ROAD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
CAMPIAGN SOFTWARE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 17 / 2013

**Transaction ID : SB21B.I3386**

Amount of Each Disbursement this Period

160.00

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 1593 SPRING HILL ROAD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
CAMPAIGN SOFTWARE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 16 / 2013

**Transaction ID : SB21B.I3444**

Amount of Each Disbursement this Period

160.00

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

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

480.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Strategy PAC**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 SPRING HILL ROAD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
CAMPAIGN SOFTWARE

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2013

**Transaction ID : SB21B.I3468**

Amount of Each Disbursement this Period

160.00

Full Name (Last, First, Middle Initial)

**B. PATTON BOGGS, LLP**

Mailing Address PO BOX 204352

City DALLAS State TX Zip Code 75320-0001

Purpose of Disbursement  
CONSULTING - COMPLIANCE & REPORTING

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 22 / 2013

**Transaction ID : SB21B.I3313**

Amount of Each Disbursement this Period

231.25

Full Name (Last, First, Middle Initial)

**C. PATTON BOGGS, LLP**

Mailing Address PO BOX 204352

City DALLAS State TX Zip Code 75320-0001

Purpose of Disbursement  
CONSULTING - LEGAL AND REPORTING

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 22 / 2013

**Transaction ID : SB21B.I3427**

Amount of Each Disbursement this Period

910.00

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

1301.25

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

9903.22

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input checked="" 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)

**Strategy PAC**

Full Name (Last, First, Middle Initial)

## A. REPUBLICAN NATIONAL COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2013

Mailing Address 310 1ST ST SE

**Transaction ID : SB22.I3480**

City WASHINGTON State DC Zip Code 20003-1885

Amount of Each Disbursement this Period

Purpose of Disbursement  
DONATOION

011
Category/ Type

15000.00
----------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

## B.

Date of Disbursement

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

Mailing Address

Amount of Each Disbursement this Period

City State Zip Code

Purpose of Disbursement

Category/ Type

--

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

## C.

Date of Disbursement

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

Mailing Address

Amount of Each Disbursement this Period

City State Zip Code

Purpose of Disbursement

Category/ Type

--

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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

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

15000.00
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15000.00
----------



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**Strategy PAC**

Full Name (Last, First, Middle Initial)  
**A. COLLINS FOR SENATOR**

Date of Disbursement: MM / DD / YYYY  
06 / 27 / 2013

Mailing Address: PO BOX 522

City: PORTLAND State: ME Zip Code: 04112-0522

Purpose of Disbursement: DONATION

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Transaction ID : **SB23.I3479**

Amount of Each Disbursement this Period: 5000.00

Category/Type: 011

Full Name (Last, First, Middle Initial)  
**B. TEXANS FOR SENATOR JOHN CORNYN**

Date of Disbursement: MM / DD / YYYY  
03 / 28 / 2013

Mailing Address: 1609 SHOAL CREEK BLVD  
STE 204

City: AUSTIN State: TX Zip Code: 78701-1054

Purpose of Disbursement: POLITICAL DONATION

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Transaction ID : **SB23.I3498**

Amount of Each Disbursement this Period: 5000.00

Category/Type: 011

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

Date of Disbursement: MM / DD / YYYY

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Purpose of Disbursement: \_\_\_\_\_

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For: \_\_\_\_\_  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Amount of Each Disbursement this Period: \_\_\_\_\_

Category/Type: \_\_\_\_\_

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 10000.00

**TOTAL** This Period (last page this line number only)..... ▶ 10000.00