

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) PO Box 538
Check if different than previously reported. (ACC) Wausau WI 54402-0538
CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C C00464339
3. IS THIS REPORT NEW (N) OR AMENDED (A)
STATE DISTRICT WI 07

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
[X] April 15 Quarterly Report (Q1)
[ ] July 15 Quarterly Report (Q2)
[ ] October 15 Quarterly Report (Q3)
[ ] January 31 Year-End Report (YE)
[ ] Termination Report (TER)

(b) 12-Day PRE-Election Report for the:
[ ] Primary (12P) [ ] General (12G) [ ] Runoff (12R)
[ ] Convention (12C) [ ] Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day POST-Election Report for the:
[ ] General (30G) [ ] Runoff (30R) [ ] Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 01 / 01 / 2020 through M M / D D / Y Y Y Y 03 / 31 / 2020

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 Masterson, Michael, , ,
Signature of Treasurer Masterson, Michael, , , [Electronically Filed] Date M M / D D / Y Y Y Y 04 / 15 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**Duffy for Wisconsin**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	569943.21
(b) Total Contribution Refunds (from Line 20(d)) .....	5500.00	192732.48
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	- 5500.00	377210.73
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	24396.06	699309.51
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	11760.12
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	24396.06	687549.39
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1697219.74	
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	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Duffy for Wisconsin

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	176760.87
(ii) Unitemized.....	0.00	87887.34
(iii) TOTAL of contributions from individuals ▶	0.00	264648.21
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	305295.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	569943.21
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	300830.13
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	11760.12
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....	- 203389.04	- 94961.56
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	- 203389.04	787571.90

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	24396.06	699309.51
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	173132.48
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5500.00	19600.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	5500.00	192732.48
21. OTHER DISBURSEMENTS .....	7500.00	10500.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	37396.06	902541.99

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1938004.84
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	- 203389.04
25. SUBTOTAL (add Line 23 and Line 24).....	1734615.80
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	37396.06
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1697219.74

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 5 OF 18	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
**Duffy for Wisconsin**

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

Mailing Address P.O. BOX 578

City CHIPPEWA FALLS	State WI	Zip Code 54729
------------------------	-------------	-------------------

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 - 98118.91

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2020

**Transaction ID : SA15.12332**

Amount of Each Receipt this Period  
 - 203401.38

Memo Item  
**INVESTMENT LOSS**

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

Mailing Address

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

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	- 203401.38
<b>TOTAL</b> This Period (last page this line number only)..... ▶	- 203401.38

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 18	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duffy for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. ACCOUNTANTS WORLD</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2020
Mailing Address 140 FELL COURT		FEC Identification Number C
City HAUPPAUGE	State NY	Zip Code 11788
Purpose of Disbursement PAYROLL SERVICE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 45.00	
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) ▼	Transaction ID : SB17.I12333
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. MILLER, JIM, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2020
Mailing Address 15611 W LAKEWOOD DRIVE		FEC Identification Number C
City HAYWARD	State WI	Zip Code 54843-6401
Purpose of Disbursement TRAVEL	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 530.00	
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) ▼	Transaction ID : SB17.I12352
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. WOLLER, BRETT, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2020
Mailing Address P.O. BOX 538		FEC Identification Number C
City WAUSAU	State WI	Zip Code 54402
Purpose of Disbursement PAYROLL	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 221.26	
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) ▼	Transaction ID : SB17.I12349
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	796.26
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 18	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duffy for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. ACCOUNTANTS WORLD</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2020
Mailing Address 140 FELL COURT		FEC Identification Number C
City HAUPPAUGE	State NY	Zip Code 11788
Purpose of Disbursement PAYROLL SERVICE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 45.00	
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) ▼	Transaction ID : SB17.I12334
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. UNITED STATES TREASURY</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2020
Mailing Address INTERNAL REVENUE SERVICE CENTER		FEC Identification Number C
City OGDEN	State UT	Zip Code 84201
Purpose of Disbursement PAYROLL TAX	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 47.41	
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) ▼	Transaction ID : SB17.I12343
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020
Mailing Address P.O. BOX 650448		FEC Identification Number C
City DALLAS	State TX	Zip Code 75265
Purpose of Disbursement CREDIT CARD PAYMENT	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 4468.59	
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) ▼	Transaction ID : SB17.I12338
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4561.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duffy for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. DELTA AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020		
Mailing Address 1030 DELTA BLVD			FEC Identification Number C		
City ATLANTA	State GA	Zip Code 30354-7561	Amount of Each Disbursement this Period 96.00		
Purpose of Disbursement TRAVEL		Category/Type	Transaction ID : SB17.I12354		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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. GOOGLE</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020		
Mailing Address 1600 AMPHITHEATRE PARKWAY			FEC Identification Number C		
City MOUNTAIN VIEW	State CA	Zip Code 94043	Amount of Each Disbursement this Period 12.00		
Purpose of Disbursement WEB SERVICE		Category/Type	Transaction ID : SB17.I12355		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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. GOOGLE</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020		
Mailing Address 1600 AMPHITHEATRE PARKWAY			FEC Identification Number C		
City MOUNTAIN VIEW	State CA	Zip Code 94043	Amount of Each Disbursement this Period 12.00		
Purpose of Disbursement WEB SERVICE		Category/Type	Transaction ID : SB17.I12356		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duffy for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. THE RITZ CARLTON</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020		
Mailing Address 10400 FERNWOOD RD			FEC Identification Number C		
City BETHESDA	State MD	Zip Code 20817	Amount of Each Disbursement this Period 3356.64		
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17.I12358		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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. TRUMP INTERNATIONAL HOTEL</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020		
Mailing Address 1100 PENNSYLVANIA AVE NW			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20004	Amount of Each Disbursement this Period 644.00		
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17.I12359		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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. UBER TECHNOLOGIES INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020		
Mailing Address 1455 MARKET ST FL 4			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94103-1611	Amount of Each Disbursement this Period 56.80		
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17.I12360		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duffy for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. UBER TECHNOLOGIES INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020		
Mailing Address 1455 MARKET ST FL 4			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94103-1611	Amount of Each Disbursement this Period 82.98		
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17.I12361		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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. WALL STREET JOURNAL</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020		
Mailing Address 1350 BROADWAY SUITE 2400			FEC Identification Number C		
City NEW YORK	State NY	Zip Code 10018	Amount of Each Disbursement this Period 11.54		
Purpose of Disbursement SUBSCRIPTION		Category/ Type	Transaction ID : SB17.I12362		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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. WALL STREET JOURNAL</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2020		
Mailing Address 1350 BROADWAY SUITE 2400			FEC Identification Number C		
City NEW YORK	State NY	Zip Code 10018	Amount of Each Disbursement this Period 19.49		
Purpose of Disbursement SUBSCRIPTION		Category/ Type	Transaction ID : SB17.I12363		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 18	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duffy for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. UNITED STATES TREASURY</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2020	
Mailing Address INTERNAL REVENUE SERVICE CENTER			FEC Identification Number C	
City OGDEN	State UT	Zip Code 84201	Amount of Each Disbursement this Period 253.83	
Purpose of Disbursement PAYROLL TAX		Category/ Type	Transaction ID : SB17.I12344	
Candidate Name		<input type="checkbox"/> Memo Item		
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. WOLLER, BRETT, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2020	
Mailing Address P.O. BOX 538			FEC Identification Number C	
City WAUSAU	State WI	Zip Code 54402	Amount of Each Disbursement this Period 221.25	
Purpose of Disbursement PAYROLL		Category/ Type	Transaction ID : SB17.I12350	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. ACCOUNTANTS WORLD</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2020	
Mailing Address 140 FELL COURT			FEC Identification Number C	
City HAUPPAUGE	State NY	Zip Code 11788	Amount of Each Disbursement this Period 55.50	
Purpose of Disbursement PAYROLL SERVICE		Category/ Type	Transaction ID : SB17.I12335	
Candidate Name		<input type="checkbox"/> Memo Item		
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).....▶	530.58
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 18			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duffy for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. UNITED STATES TREASURY</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2020		
Mailing Address INTERNAL REVENUE SERVICE CENTER			FEC Identification Number C		
City OGDEN	State UT	Zip Code 84201	Amount of Each Disbursement this Period 47.43		
Purpose of Disbursement PAYROLL TAX		Category/ Type	Transaction ID : SB17.I12345		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. ACCOUNTANTS WORLD</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2020		
Mailing Address 140 FELL COURT			FEC Identification Number C		
City HAUPPAUGE	State NY	Zip Code 11788	Amount of Each Disbursement this Period 45.00		
Purpose of Disbursement PAYROLL SERVICE		Category/ Type	Transaction ID : SB17.I12336		
Candidate Name		<input type="checkbox"/> Memo Item			
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. UNITED STATES TREASURY</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2020		
Mailing Address INTERNAL REVENUE SERVICE CENTER			FEC Identification Number C		
City OGDEN	State UT	Zip Code 84201	Amount of Each Disbursement this Period 47.41		
Purpose of Disbursement PAYROLL TAX		Category/ Type	Transaction ID : SB17.I12346		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	139.84
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 18			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duffy for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. WOLLER, BRETT, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2020		
Mailing Address P.O. BOX 538			FEC Identification Number <b>C</b>		
City WAUSAU	State WI	Zip Code 54402			
Purpose of Disbursement PAYROLL			Transaction ID : <b>SB17.I12351</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. ACCOUNTANTS WORLD</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2020		
Mailing Address 140 FELL COURT			FEC Identification Number <b>C</b>		
City HAUPPAUGE	State NY	Zip Code 11788			
Purpose of Disbursement PAYROLL SERVICE			Transaction ID : <b>SB17.I12337</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
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. WOLLER, BRETT, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2020		
Mailing Address P.O. BOX 538			FEC Identification Number <b>C</b>		
City WAUSAU	State WI	Zip Code 54402			
Purpose of Disbursement GENERAL CAMPAIGN CONSULTING			Transaction ID : <b>SB17.I12347</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
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).....▶	516.26
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 18	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duffy for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. SUN PRINTING, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2020	
Mailing Address 1800 GRAND AVENUE			FEC Identification Number C	
City WAUSAU	State WI	Zip Code 54403	Amount of Each Disbursement this Period 10279.45	
Purpose of Disbursement PRINTING		Category/Type	Transaction ID : SB17.I12342	
Candidate Name		Memo Item <input type="checkbox"/>		
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. AMERICAN EXPRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2020	
Mailing Address P.O. BOX 650448			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75265	Amount of Each Disbursement this Period 5304.85	
Purpose of Disbursement CREDIT CARD PAYMENT		Category/Type	Transaction ID : SB17.I12339	
Candidate Name		Memo Item <input type="checkbox"/>		
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. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2020	
Mailing Address 4333 AMON CARTER BLVD			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 516.61	
Purpose of Disbursement TRAVEL		Category/Type	Transaction ID : SB17.I12364	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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).....▶	15584.30
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duffy for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. DELTA AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2020		
Mailing Address 1030 DELTA BLVD			FEC Identification Number C		
City ATLANTA	State GA	Zip Code 30354-7561	Amount of Each Disbursement this Period 4756.75		
Purpose of Disbursement TRAVEL		Category/Type	Transaction ID : SB17.I12365		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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. GOOGLE</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2020		
Mailing Address 1600 AMPHITHEATRE PARKWAY			FEC Identification Number C		
City MOUNTAIN VIEW	State CA	Zip Code 94043	Amount of Each Disbursement this Period 12.00		
Purpose of Disbursement WEB SERVICE		Category/Type	Transaction ID : SB17.I12366		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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. WALL STREET JOURNAL</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2020		
Mailing Address 1350 BROADWAY SUITE 2400			FEC Identification Number C		
City NEW YORK	State NY	Zip Code 10018	Amount of Each Disbursement this Period 19.49		
Purpose of Disbursement SUBSCRIPTION		Category/Type	Transaction ID : SB17.I12367		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duffy for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. WOLLER, BRETT, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2020		
Mailing Address P.O. BOX 538			FEC Identification Number C		
City WAUSAU	State WI	Zip Code 54402	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement GENERAL CAMPAIGN CONSULTING		Category/Type	Transaction ID : SB17.I12348		
Candidate Name		<input type="checkbox"/> Memo Item			
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. CROSBY OTTENHOFF GROUP</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2020		
Mailing Address 611 PENNSYLVANIA AVE SE #267			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 1742.82		
Purpose of Disbursement COMPLIANCE CONSULTING/DELIVERY SERVICE/OFFICE SUPPLIES		Category/Type	Transaction ID : SB17.I12340		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/Type	Memo Item		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2242.82
<b>TOTAL</b> This Period (last page this line number only).....▶	24371.06

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 18	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duffy for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. NATIONWIDE MUTUAL INSURANCE COMPANY FINANCIAL &amp; INVESTMENTS POLITICAL ACTION COMMITTEE</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2020	
Mailing Address ONE NATIONWIDE PLAZA, 1-32-404			
City COLUMBUS	State OH	Zip Code 43215	
Purpose of Disbursement REFUND OF CONTRIBUTION		FEC Identification Number C C00406215	
Candidate Name		Amount of Each Disbursement this Period 2000.00	
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: _____	Transaction ID : SB20C.I12373 <input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. STRUCTURED FINANCE COALITION POLITICAL ACTION COMMITTEE (STRUCTURED FINANCE PAC)</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2020	
Mailing Address 1776 I STREET ,NW SUITE 501			
City WASHINGTON	State DC	Zip Code 20006	
Purpose of Disbursement REFUND OF CONTRIBUTION		FEC Identification Number C C00633354	
Candidate Name		Amount of Each Disbursement this Period 2500.00	
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: _____	Transaction ID : SB20C.I12371 <input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. THE VANGUARD GROUP COMMITTEE FOR RESPONSIBLE GOVERNMENT</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2020	
Mailing Address 801 PENNSYLVANIA AVENUE SUITE 505			
City WASHINGTON	State DC	Zip Code 20004-2615	
Purpose of Disbursement REFUND OF CONTRIBUTION		FEC Identification Number C C00410266	
Candidate Name		Amount of Each Disbursement this Period 1000.00	
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: _____	Transaction ID : SB20C.I12372 <input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 18	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duffy for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. MCCARTHY VICTORY FUND</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2020
Mailing Address PO BOX 30844		FEC Identification Number C 00541011
City BETHESDA	State MD	Zip Code 20824-0844
Purpose of Disbursement CONTRIBUTION TO COMMITTEE		Amount of Each Disbursement this Period 5000.00
Candidate Name		Transaction ID : SB21.I12368
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. TONY GONZALES FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2020
Mailing Address 14439 NW MILITARY HIGHWAY SUITE 108-488		FEC Identification Number C 00706614
City SAN ANTONIO	State TX	Zip Code 78231
Purpose of Disbursement CONTRIBUTION TO COMMITTEE		Amount of Each Disbursement this Period 500.00
Candidate Name <b>GONZALES, ERNEST, ANTHONY TONY, , II</b>		Transaction ID : SB21.I12369
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: TX District: 35		

Full Name (Last, First, Middle Initial) <b>C. TIFFANY FOR WISCONSIN, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2020
Mailing Address PO BOX 1007		FEC Identification Number C 00718635
City WAUSAU	State WI	Zip Code 54402
Purpose of Disbursement CONTRIBUTION TO COMMITTEE		Amount of Each Disbursement this Period 2000.00
Candidate Name <b>TIFFANY, TOM, , ,</b>		Transaction ID : SB21.I12370
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ SPEC GEN	<input type="checkbox"/> Memo Item
State: WI District: 07		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	7500.00