

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

Republican Party of Wisconsin

ADDRESS (number and street)

148 E. Johnson Street

(Check if address is changed)

Madison

WI

53703

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

kmize@wisgop.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.wisgop.org

COMMITTEE'S FAX NUMBER

6082574141

2. DATE

02 / 19 / 2007

3. FEC IDENTIFICATION NUMBER

C C00074450

4. IS THIS STATEMENT

NEW (N)

OR

AMENDED (A)

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

Type or Print Name of Treasurer Bill Johnson

Signature of Treasurer Electronically Filed by Bill Johnson

Date 02 / 19 / 2007

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2003)

5. TYPE OF COMMITTEE (Check One)

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation Office Sought: House Senate President State District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

- (d) This committee is a **STA** (National, State (or subordinate) committee of the **REP** (Democratic, Republican, etc.) Party.
- (e) This committee is a separate segregated fund
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

None _____

Mailing Address **228 S Washington St. STE 340** _____

Alexandria **VA** **22314** - _____

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship **Joint Cmte. Rep** _____

Type of Connected Organization:

- Corporation Corporation w/o Capital Stock Labor Organization
- Membership Organization Trade Association Cooperative

Write or Type Committee Name

Republican Party of Wisconsin

- 7. **Custodian of Records:** Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name **Kathryn Mize**

Mailing Address **414 N Livingston Street #2**

Madison **WI** **53703**

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

Controller Telephone number **608** **257** **4765**

- 8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer **Bill Johnson**

Mailing Address **10559 Michigan Ave**

Hayward **WI** **54843**

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

Treasurer Telephone number **715** **634** **4477**

Full Name of Designated Agent **Mark Jefferson**

Mailing Address **1678 Cottonville Avenue**

Arkdale **WI** **54613**

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

Executive Director Telephone number **608** **257** **4765**

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Wachovia Bank

Mailing Address

1753 Pinnacle Dr., 3rd FL

McLean

VA

22102

CITY ▲

STATE ▲

ZIP CODE ▲

Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

[ADDITIONAL]

Wachovia Bank

Mailing Address **1753 Pinnacle Dr., 3rd FL**

McLean **VA** **22102**

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

None

Mailing Address **228 South Washington Street**

Suite 115

Alexandria **VA** **22314**

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship **Joint Fundraising Re**

Type of Connected Organization:

- Corporation
- Corporation w/o Capital Stock
- Labor Organization
- Membership Organization
- Trade Association
- Cooperative

Designated Agent

[ADDITIONAL]

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number - -



Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

[ADDITIONAL]

Mailing Address

BB&T

1909 K St NW

Washington **DC** **20006**

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

Wisconsin Road to Victory Committee

Mailing Address

228 S Washington St STE115

Alexandria **VA** **22314**

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship **Joint Cmt Rep**

Type of Connected Organization:

- Corporation
- Corporation w/o Capital Stock
- Labor Organization
- Membership Organization
- Trade Association
- Cooperative

Designated Agent

[ADDITIONAL]

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number - -

