

# 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  
01 01 2015

through

M M M / D D D / Y Y Y Y Y Y  
01 31 2015

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  
06 04 2015

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  
Only

### FEC 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 |
| 01  |   | 01  |   | 2015      |

To:

|     |   |     |   |           |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 01  |   | 31  |   | 2015      |

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, <div>Y Y Y Y Y<br/>2015</div>  |                         | <div>433731.94</div>              |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <div>433731.94</div>    |                                   |
| (c) Total Receipts (from Line 19) .....  | <div>150279.12</div>    | <div>150279.12</div>              |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <div>584011.06</div>    | <div>584011.06</div>              |
| 7. Total Disbursements (from Line 31).....   | <div>207839.95</div>    | <div>207839.95</div>              |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                        | <div>376171.11</div>    | <div>376171.11</div>              |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <div>0.00</div>         |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <div>0.00</div>         |                                   |



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 Y  
 01 / 01 / 2015

To:

 M M / D D / Y Y Y Y Y  
 01 / 31 / 2015
**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).....

21325.00

21325.00

(ii) Unitemized .....

95149.89

95149.89

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

116474.89

116474.89

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

6500.00

6500.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

122974.89

122974.89

## 12. Transfers From Affiliated/Other

Party Committees.....

6100.00

6100.00

## 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).....

6395.55

6395.55

## 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).....

14808.68

14808.68

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

14808.68

14808.68

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

150279.12

150279.12

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

135470.44

135470.44

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....  | 2614.13                       | 2614.13                           |
| (ii) Non-Federal Share.....  | 14813.42                      | 14813.42                          |
| (b) Other Federal Operating Expenditures .....   | 118364.29                     | 118364.29                         |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 135791.84                     | 135791.84                         |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00                          | 0.00                              |
| 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 .....                           | 72048.11                      | 72048.11                          |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....           | 72048.11                      | 72048.11                          |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 207839.95                     | 207839.95                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 193026.53                     | 193026.53                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....          | 122974.89                     | 122974.89                         |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                              | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....      | 122974.89                     | 122974.89                         |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... ► | 120978.42                     | 120978.42                         |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                   | 6395.55                       | 6395.55                           |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) ..... ►              | 114582.87                     | 114582.87                         |

# **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 6 OF 84

☒ 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)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. ELLOINE M. CLARK**

Mailing Address 3716 MAPLEWOOD AVENUE

City

DALLAS

State

TX

Zip Code

75205-2827

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

01 / 09 / 2015

Transaction ID : SA11.959649

Amount of Each Receipt this Period

750.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. RICHARDSON MCKINNEY**

Mailing Address 2572 TOUCHMARK COURT

City

APPLETON

State

WI

Zip Code

54914-8792

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST  
EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 09 / 2015

Transaction ID : SA11.959647

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MARY FRANKLIN EVERT**

Mailing Address 810 WOODWARD DR

City

MADISON

State

WI

Zip Code

53704-2238

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

01 / 13 / 2015

Transaction ID : SA11.959765

Amount of Each Receipt this Period

250.00

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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Detailed Summary Page

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PAGE 7 OF 84

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

## **A. JON HENDERSEN**

Mailing Address 1826 CRESTWOOD DR

City  
CALEDONIA

State Zip Code  
WI 53108-9719

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JON HENDERSEN COMMERCIAL REAL ESTA

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

01 / 14 / 2015

Transaction ID : SA11.961041

Amount of Each Receipt this Period

3000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. KAREN REISENAUER**

Mailing Address 5504 CAMBRIDGE LANE UNIT 3

City  
MOUNT PLEASANT

State Zip Code  
WI 53406-2877

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 ▼

315.00

Date of Receipt

01 / 14 / 2015

Transaction ID : SA11.959808

Amount of Each Receipt this Period

315.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. LAVONNE ZIETLOW**

Mailing Address 2802 BERGAMOT PLAFE

City  
ONALASKA

State Zip Code  
WI 54650-

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

01 / 14 / 2015

Transaction ID : SA11.959913

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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

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

3815.00

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

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FOR LINE NUMBER: PAGE 8 OF 84  
(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. DEAN FITZGERALD**

Mailing Address 1200 W SIERRA LANE

City

THIENSVILLE

State

WI

Zip Code

53092-6054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 16 / 2015

Transaction ID : SA11.960386

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. RICHARD UHLEIN**

Mailing Address 12575 ULINE DRIVE

City

PLEASANT PRAIRIE

State

WI

Zip Code

53158-3686

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST

EFFORTS

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / 16 / 2015

Transaction ID : SA11.960373

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. MR. BERNARD VAN DINTER**

Mailing Address 8081 FIELDING LANE

City

GREENDALE

State

WI

Zip Code

53129-2115

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

01 / 21 / 2015

Transaction ID : SA11.960636

Amount of Each Receipt this Period

300.00

CONTRIBUTION

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

1800.00

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

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 9 OF 84  
(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. JAMI HEIDEGGER**

Mailing Address 19901 NORTHRIDGE RD

City State Zip Code  
 CHATSWORTH CA 91311-1822

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 ▼

1000.00

Date of Receipt

01 / 22 / 2015

**Transaction ID : SA11.962310**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. FOREST COUNTY POTAWATOMI COMMU**

Mailing Address PO 340

City State Zip Code  
 CRANDON WI 54520-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / 22 / 2015

**Transaction ID : SA11.965940**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. MARK ASCHILMAN**

Mailing Address 3970 NORTH OAKLAND AVE

City State Zip Code  
 SHOREWOOD WI 53211-2265

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ORTHO SURGEON

Occupation

ORTHAPEAEDIC CONSULTANTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 23 / 2015

**Transaction ID : SA11.962308**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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

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

2500.00

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

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PAGE 10 OF 84

☒ 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. RICHARDSON MCKINNEY**

Mailing Address 2572 TOUCHMARK COURT

City  
APPLETON

State Zip Code  
WI 54914-8792

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 23 / 2015

Transaction ID : SA11.961301

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. ROBBI HULL**

Mailing Address 3804 PEAK LOOKOUT DR

City  
AUSTIN

State Zip Code  
TX 78738-1725

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 ▼

250.00

Date of Receipt

01 / 26 / 2015

Transaction ID : SA11.961904

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. DETLEF MOORE**

Mailing Address 3704 N LAKE DRIVE

City  
SHOREWOOD

State Zip Code  
WI 53211-2646

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

IAO

ASSOCIATION MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 26 / 2015

Transaction ID : SA11.961292

Amount of Each Receipt this Period

500.00

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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FOR LINE NUMBER:  
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PAGE 11 OF 84

☒ 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. DAN SCHMIDT**

Mailing Address 527 W LAKE PARK PLACE

City  
LAKE MILLS

State Zip Code  
WI 53551-1551

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORWARD MANAGEMENT, INC

Occupation  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / 26 / 2015

**Transaction ID : SA11.961309**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. MARIAN STANLY**

Mailing Address 2427 S 96TH STREET

City  
MILWAUKEE

State Zip Code  
WI 53227-2203

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 ▼

2000.00

Date of Receipt

01 / 26 / 2015

**Transaction ID : SA11.961255**

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. DON L. TAYLOR**

Mailing Address 27100 SHANANAGI LANE

City  
WAUKESHA

State Zip Code  
WI 53188-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WAUKESHA STATE BANK

Occupation  
BANKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 26 / 2015

**Transaction ID : SA11.961293**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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

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

3500.00

# **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 12 OF 84

☒ 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. BARBARA H. WILSON**

Mailing Address 2540 GREEN ST

City

SAN FRANCISCO

State

CA

Zip Code

94123-4629

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

01 / 26 / 2015

Transaction ID : SA11.961958

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. RONALD DOINE**

Mailing Address 10883 COUNTY ROAD A

City

MARSHFIELD

State

WI

Zip Code

54449-9607

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DOINE EXCAVATING, INC

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 27 / 2015

Transaction ID : SA11.961666

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. FRANCIS FITZPATRICK**

Mailing Address 100 E ANCHOR AVE

City

EUGENE

State

OR

Zip Code

97404-1702

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 ▼

375.00

Date of Receipt

01 / 27 / 2015

Transaction ID : SA11.962010

Amount of Each Receipt this Period

375.00

CONTRIBUTION

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

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

925.00

# **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 13 OF 84

☒ 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. JOHN N. DYKEMA**

Mailing Address 1535 FOX RIDGE CT

City  
DEPERE

State  
WI

Zip Code  
54115-1907

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SASIB PACKAGING

Occupation  
PLANT MGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

01 / 28 / 2015

**Transaction ID : SA11.962311**

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. CHRIS MANCINI**

Mailing Address 25707 BRIDLE FALLS

City  
MAGNOLIA

State  
TX

Zip Code  
77355-5890

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

01 / 28 / 2015

**Transaction ID : SA11.962061**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. TRACY PAPANDREA**

Mailing Address N28W30628 RED FOX CT

City  
PEWAUKEE

State  
WI

Zip Code  
53072-4292

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation  
MOM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 28 / 2015

**Transaction ID : SA11.962322**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

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

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

5750.00

# **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 14 OF 84

☒ 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. RYAN SICARD**

Mailing Address P.O. BOX 237

City  
SOMERSET

State Zip Code  
WI 54025-0237

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNIVERSITY OF WISCONSIN-RF

Occupation  
INFORMATION TECHNOLOGY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1035.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 28 / 2015

**Transaction ID : SA11.961773**

Amount of Each Receipt this Period

35.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. RYAN SICARD**

Mailing Address P.O. BOX 237

City  
SOMERSET

State Zip Code  
WI 54025-0237

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNIVERSITY OF WISCONSIN-RF

Occupation  
INFORMATION TECHNOLOGY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1035.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 28 / 2015

**Transaction ID : SA11.962309**

Amount of Each Receipt this Period

1000.00

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

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

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

1035.00

21325.00

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

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

FOR LINE NUMBER: PAGE 15 OF 84  
(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. MICROSOFT CORPORATION PAC**

Mailing Address 16011 NE 36TH WAY  
BOX 97017

City State Zip Code  
REDMOND WA 98052-6301

FEC ID number of contributing  
federal political committee.

**C** C00236489

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**01** / **14** / **2015**

**Transaction ID : SA11.965944**

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. US CELLULAR POLITICAL ACTION COMMITTEE**

Mailing Address 8410 W BRYN MAWR AVE

City State Zip Code  
CHGO IL 60631-

FEC ID number of contributing  
federal political committee.

**C** C00336057

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**01** / **14** / **2015**

**Transaction ID : SA11.965945**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. THRIVENT FINANCIAL FOR LUTHERANS EMPLOYEE PAC**

Mailing Address POST OFFICE BOX 1892

City State Zip Code  
APPLETON WI 54912-1892

FEC ID number of contributing  
federal political committee.

**C** C00121319

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**01** / **16** / **2015**

**Transaction ID : SA11.965942**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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

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

6500.00

6500.00

# **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 16 OF 84

☐ 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. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 1ST ST SE

City  
WASHINGTON

State Zip Code  
DC 20003-1885

FEC ID number of contributing  
federal political committee.

**C** C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6100.00

Date of Receipt

**01** / **06** / **2015**

**Transaction ID : SA11.965939**

Amount of Each Receipt this Period

6100.00

TRANSFER

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 ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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 ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

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

6100.00

6100.00

# **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 17 OF 84

☐ 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. CHARTER COMMUNICATIONS**

Mailing Address 135 SOUTH LASALLE STREET DEPT 8123

City State Zip Code  
CHICAGO IL 60674-1072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.75

Date of Receipt

01 / 09 / 2015

Transaction ID : SA11.965952

Amount of Each Receipt this Period

113.33

REFUND

Full Name (Last, First, Middle Initial)

## **B. CHARTER COMMUNICATIONS**

Mailing Address 135 SOUTH LASALLE STREET DEPT 8123

City State Zip Code  
CHICAGO IL 60674-1072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.75

Date of Receipt

01 / 09 / 2015

Transaction ID : SA11.965953

Amount of Each Receipt this Period

63.72

REFUND

Full Name (Last, First, Middle Initial)

## **C. CHARTER COMMUNICATIONS**

Mailing Address 135 SOUTH LASALLE STREET DEPT 8123

City State Zip Code  
CHICAGO IL 60674-1072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.75

Date of Receipt

01 / 09 / 2015

Transaction ID : SA11.965954

Amount of Each Receipt this Period

10.07

REFUND

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

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

187.12

# **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 18 OF 84

☐ 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. EDGEWOOD PLAZA**

Mailing Address 10400 W INNOVATION DRIVE  
STE 110

City State Zip Code  
MILWAUKEE WI 53226-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1160.94

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 09 / 2015

Transaction ID : SA11.965951

Amount of Each Receipt this Period

1160.94

REFUND

Full Name (Last, First, Middle Initial)

## **B. MAYFAIR OFFICE LLC**

Mailing Address 555 W BROWN DEER ROAD  
#220

City State Zip Code  
MILWAUKEE WI 53217-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 09 / 2015

Transaction ID : SA11.965956

Amount of Each Receipt this Period

400.00

REFUND

Full Name (Last, First, Middle Initial)

## **C. NGAN LE**

Mailing Address S4185 WHISPERING PINES DRIVE

City State Zip Code  
BARABOO WI 53913-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 09 / 2015

Transaction ID : SA11.965950

Amount of Each Receipt this Period

1600.00

REFUND

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

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

3160.94

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

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

FOR LINE NUMBER: PAGE 19 OF 84  
(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. CHARTER COMMUNICATIONS**

Mailing Address 135 SOUTH LASALLE STREET DEPT 8123

City State Zip Code  
 CHICAGO IL 60674-1072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.75

Date of Receipt

01 / 13 / 2015

Transaction ID : SA11.965948

Amount of Each Receipt this Period

188.01

REFUND

Full Name (Last, First, Middle Initial)

## **B. CHARTER COMMUNICATIONS**

Mailing Address 135 SOUTH LASALLE STREET DEPT 8123

City State Zip Code  
 CHICAGO IL 60674-1072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.75

Date of Receipt

01 / 13 / 2015

Transaction ID : SA11.965949

Amount of Each Receipt this Period

206.62

REFUND

Full Name (Last, First, Middle Initial)

## **C. MILLS ENTERPRISES LLC**

Mailing Address 4015 - 80TH STREET

City State Zip Code  
 KENOSHA WI 53142-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.92

Date of Receipt

01 / 14 / 2015

Transaction ID : SA11.965947

Amount of Each Receipt this Period

507.92

REFUND

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

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

902.55

# **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 20 OF 84

☐ 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. 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 ▼

2000.00

Date of Receipt

**01** / **20** / **2015**

**Transaction ID : SA11.965941**

Amount of Each Receipt this Period

2000.00

**RENT REIMBURSEMENT**

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 ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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 ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

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

2000.00

6250.61

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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. PIRYX

Category/  
Type

4.50

State:  District:

## B. CAMPAIGN NOW

Category/  
Type

97.12

State:  District:

### C. PIRYX

Category/  
Type

0.86

State:  District:

| Age Group | Percentage |
|-----------|------------|
| 18-24     | 102.48     |
| 25-34     | 102.48     |
| 35-44     | 102.48     |
| 45-54     | 102.48     |
| 55-64     | 102.48     |
| 65-74     | 102.48     |
| 75-84     | 102.48     |
| 85+       | 102.48     |

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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. PIRYX

Category/  
Type

3.23

State:  District:

## B. ASPECT CONSULTING, LLC

Category/  
Type

6000.00

State:  District:

**C. BK-DSI, LLC**

Category/  
Type

4822.92

State:  District:

10826.15

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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. LIND WEININGER LLC**

Date of Disbursement

Three 7-segment displays are shown, each with a label above it. The first display is labeled 'M M' and shows the number '01'. The second display is labeled 'D D' and shows the number '07'. The third display is labeled 'Y Y Y Y' and shows the year '2015'.

Transaction ID : SB21B.I21213

Category/  
Type

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

State:  District:

Amount of Each Disbursement this Period

1000.00

## B. PIRYX

Date of Disbursement



Transaction ID : SB21B.I21174

Category/  
Type

Disbursement For:

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

State:  District:

Amount of Each Disbursement this Period

2.84

### C. PUSH DIGITAL

Date of Disbursement

Transaction ID : SB21B.I21207

Category/  
Type

Disbursement For:

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

State:  District:

Amount of Each Disbursement this Period

1819.95

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

2822.79

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

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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. PIRYX

Mailing Address 85 NATOMA STREET

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| SAN FRANCISCO | CA    | 94105    |

Transaction ID : SB21B.I21175

|                         |                            |
|-------------------------|----------------------------|
| Purpose of Disbursement | CREDIT CARD PROCESSING FEE |
|-------------------------|----------------------------|

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

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

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

State:  District:

Full Name (Last, First, Middle Initial)

## B. BMO HARRIS BANK

Date of Disbursement

M M / D D / Y Y Y Y  
01 09 2015

Mailing Address CREDIT CARD PROCESSING CENTER

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| MILWAUKEE | WI    | 53201    |

Transaction ID : SB21B.I21167

|                         |                     |
|-------------------------|---------------------|
| Purpose of Disbursement | CREDIT CARD PAYMENT |
|-------------------------|---------------------|

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

|                |                          |           |
|----------------|--------------------------|-----------|
| 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. ADOBE SYSTEMS

Date of Disbursement

Mailing Address 801 N 34TH STREET

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| SEATTLE | WA    | 98103    |

Transaction ID : SB21B.I21307

### Purpose of Disbursement SOFTWARE

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

|                |                          |           |
|----------------|--------------------------|-----------|
| 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).....

4245.54

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

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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. ADOBE SYSTEMS

Category/  
Type

-18.37

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

## B. AMAZON.COM

M M / D D / Y Y Y Y  
12 30 2014

Category/  
Type

808.02

Disbursement For:

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

### C. AMAZON.COM

Category/  
Type

722.00

Disbursement For:

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

0.00

\_\_\_\_\_

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

PAGE 26 OF 84

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. AMAZON.COM**

Mailing Address 1516 2ND AVENUE

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| SEATTLE | WA    | 98101    |

Purpose of Disbursement  
OFFICE SUPPLIES

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 |
| 12    |   | 31    |   | 2014      |

Transaction ID : SB21B.I21304

Amount of Each Disbursement this Period

|        |
|--------|
| 756.99 |
|--------|

[MEMO ITEM]

**B. DOMAIN NAME REGISTRATION**

Full Name (Last, First, Middle Initial)

Mailing Address 808 LAKE WASHINGTON BOULEVARD NE

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| BELLEVUE | WA    | 98004    |

Purpose of Disbursement  
DOMAIN NAME REGISTRATION

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 |
| 12    |   | 26    |   | 2014      |

Transaction ID : SB21B.I21299

Amount of Each Disbursement this Period

|       |
|-------|
| 10.00 |
|-------|

[MEMO ITEM]

**C. DOMAIN/HOSTING SERVICES**

Full Name (Last, First, Middle Initial)

Mailing Address 14455 N HAYDEN ROAD  
SUITE 219

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| SCOTTSDALE | AZ    | 85260    |

Purpose of Disbursement  
WEBSITE MAINTENANCE

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 |
| 12    |   | 27    |   | 2014      |

Transaction ID : SB21B.I21300

Amount of Each Disbursement this Period

|       |
|-------|
| 79.99 |
|-------|

[MEMO ITEM]

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

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

|      |
|------|
| 0.00 |
|------|

|  |
|--|
|  |
|--|

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

PAGE 27 OF 84

☒ 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. MICROSOFT**

Mailing Address 1 MICROSOFT WAY

City REDMOND      State WA      Zip Code 98052

Purpose of Disbursement  
SOFTWARE

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 Y  
12      29      2014

Transaction ID : SB21B.I21301

Amount of Each Disbursement this Period

105.49

[MEMO ITEM]

**B. MICROSOFT**

Full Name (Last, First, Middle Initial)

Mailing Address 1 MICROSOFT WAY

City REDMOND      State WA      Zip Code 98052

Purpose of Disbursement  
SOFTWARE

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 Y  
12      31      2014

Transaction ID : SB21B.I21305

Amount of Each Disbursement this Period

142.13

[MEMO ITEM]

**C. SAFESOFT SOLUTIONS**

Full Name (Last, First, Middle Initial)

Mailing Address 20950 WARNER CENTER LANE

City WOODLAND      State CA      Zip Code 91367

Purpose of Disbursement  
PREDICTIVE DIALER

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 Y  
01      03      2015

Transaction ID : SB21B.I21311

Amount of Each Disbursement this Period

1490.00

[MEMO ITEM]

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

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

0.00

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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. PIRYX

Category/  
Type

4.31

State:  District:

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

Candidate Name

Category/  
Type

504.83

State:  District:

### C. BANCARD/FIS MERCHANT SERVICES

Candidate Name

Category/  
Type

213.18

State:  District:

722.32

**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 29 OF 84

☒ 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. CITY OF MADISON TREASURER**

Mailing Address P.O. BOX 2999

City MADISON      State WI      Zip Code 53701

Purpose of Disbursement  
PROPERTY TAX

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  
01 / 12 / 2015

Transaction ID : SB21B.I21228

Amount of Each Disbursement this Period

13203.22

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 SPRING HILL ROAD

City TYSONS CORNER      State VA      Zip Code 22182

Purpose of Disbursement  
DATABASE SOFTWARE

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  
01 / 12 / 2015

Transaction ID : SB21B.I21197

Amount of Each Disbursement this Period

902.50

Full Name (Last, First, Middle Initial)

**C. SERVICE SPECIALISTS, INC.**

Mailing Address P.O. BOX 160

City SUN PRAIRIE      State WI      Zip Code 53590

Purpose of Disbursement  
BUILDING MAINTENANCE

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  
01 / 12 / 2015

Transaction ID : SB21B.I21164

Amount of Each Disbursement this Period

595.45

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

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

14701.17

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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. WAUKESHA EAST COMMERCE CENTER LLC**

Date of Disbursement



Three 7-segment displays are shown, each with a label above it. The first display shows '01', the second shows '12', and the third shows '2015'. Each display has a label above it: 'M M' for the first, 'D D' for the second, and 'Y Y Y Y' for the third. The displays are connected to a common ground.

Transaction ID : SB21B.I21235

Category/  
Type

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

State:  District:

Amount of Each Disbursement this Period

| Age Group | Percentage |
|-----------|------------|
| 18-24     | 28.88      |
| 25-34     | 22.22      |
| 35-44     | 16.67      |
| 45-54     | 11.11      |
| 55-64     | 8.89       |
| 65-74     | 5.56       |
| 75-84     | 3.33       |
| 85+       | 1.11       |

## B. WE ENERGIES

Date of Disbursement

Transaction ID : SB21B.I21236

Category/  
Type

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

State:  District:

Amount of Each Disbursement this Period

436.35

### C. WISCONSIN PUBLIC SERVICE CORPORATION

Date of Disbursement

Transaction ID : SB21B.I21238

Category/  
Type

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

State:  District:

Amount of Each Disbursement this Period

359.46

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

824.69

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

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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. XCEL ENERGY

Category/  
Type

745.36

State:  District:

MM / DD / YYYY

#### B. WISC DEPT OF REVENUE - RECORDS REQUEST

Category/  
Type

Transaction ID : SB21B.I21223

236.00

State:  District:

### C. CAMPAIGN NOW

Category/  
Type

Transaction ID : SB21B.I21206

2737.20

State:  District:

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

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

3718.56

**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 32 OF 84

☒ 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. CMRS-POC**

Mailing Address P.O. BOX 0575

City State Zip Code  
CAROL STREAM IL 60132
Purpose of Disbursement  
POSTAGE

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  
01 14 2015

Transaction ID : SB21B.I21224

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. PINNACLE LIST COMPANY**

Mailing Address 2800 SHIRLINGTON ROAD

City State Zip Code  
ARLINGTON VA 22206
Purpose of Disbursement  
DIRECT MAIL - NOT FEA

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  
01 14 2015

Transaction ID : SB21B.I21201

Amount of Each Disbursement this Period

2250.00

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105
Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

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  
01 14 2015

Transaction ID : SB21B.I21177

Amount of Each Disbursement this Period

144.06

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

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

2644.06

**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 33 OF 84

☒ 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. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105
Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

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  
01 14 2015
**Transaction ID : SB21B.I21178**

Amount of Each Disbursement this Period

29.00

Full Name (Last, First, Middle Initial)

**B. SOUTHWEST PUBLISHING & MAILING CORP**

Mailing Address 4000 SE ADAMS STREET

City State Zip Code  
TOPEKA KS 66609
Purpose of Disbursement  
DIRECT MAIL - NOT FEA

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  
01 14 2015
**Transaction ID : SB21B.I21202**

Amount of Each Disbursement this Period

11397.49

Full Name (Last, First, Middle Initial)

**C. STEVE BROWN FL**

Mailing Address 3864 W MILLERS BRIDGE ROAD

City State Zip Code  
TALLAHASSEE FL 32312
Purpose of Disbursement  
DIRECT MAIL - NOT FEA

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  
01 14 2015
**Transaction ID : SB21B.I21204**

Amount of Each Disbursement this Period

8585.64

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20012.13

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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. WILAND DIRECT INC.**

Mailing Address P.O. BOX 174480

| City   | State | Zip Code |
|--------|-------|----------|
| DENVER | CO    | 80217    |

| Purpose of Disbursement |
|-------------------------|
| LIST RENTAL             |

Candidate Name

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

State:  District:

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

Date of Disbursement

Transaction ID : SB21B.I21214

Amount of Each Disbursement this Period

892.66

Full Name (Last, First, Middle Initial)

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

Mailing Address P.O. BOX 930208

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| MILWAUKEE | WI    | 53293    |

|                         |               |
|-------------------------|---------------|
| Purpose of Disbursement | SALES/USE 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

Transaction ID : SB21B.I21230

Amount of Each Disbursement this Period

609.74

Full Name (Last, First, Middle Initial)

**C. DAN MORSE CONSULTING LLC**

Mailing Address 5205 BARTON ROAD

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| MADISON | WI    | 53711    |

| Purpose of Disbursement |
|-------------------------|
| FUNDRAISING CONSULTING  |

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

Transaction ID : SB21B.I21211

Amount of Each Disbursement this Period

4000.00

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

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

5502.40

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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. PIRYX

Three 7-segment displays are shown, each with a different color (blue, green, red) and a different font (serif, sans-serif, and a mix). The first display shows '01', the second shows '15', and the third shows '2015'. The displays are arranged horizontally and separated by slashes.

Category/  
Type

16.59

State:  District:

## B. PIRYX

Category/  
Type

29.00

State:  District:

### C. PIRYX

Category/  
Type

29.00

State:  District:

74.59

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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. PIRYX

Category/  
Type

29.00

State:  District:

## B. PIRYX

Category/  
Type

29.00

State:  District:

### C. PIRYX

Category/  
Type

3.23

State:  District:

[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

### A. PIRYX

Category/  
Type

29.00

State:  District:

**B. HILLCREST PROPERTIES LTD.**

Category/  
Type

1225.00

State:  District:

### C. LEXISNEXIS

Category/  
Type

229.00

State:  District:

1483.00

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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. LOMONA LLC

Category/  
Type

2068.42

State:  District:

**B. PITNEY BOWES CREDIT CORPORATION**

Category/  
Type

804.70

State:  District:

### C. PUSH DIGITAL

Category/  
Type

2000.00

State:  District:

4873.12

\_\_\_\_\_

# **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)

PAGE 39 OF 84

☒ 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. WAUKESHA EAST COMMERCE CENTER LLC**

Mailing Address 1703 PEARL STREET

City State Zip Code  
 WAUKESHA WI 53186

Purpose of Disbursement  
 OFFICE RENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
 01 / 19 / 2015

**Transaction ID : SB21B.I21220**

Amount of Each Disbursement this Period

2070.50

Full Name (Last, First, Middle Initial)

## **B. WE ENERGIES**

Mailing Address 231 W MICHIGAN STREET

City State Zip Code  
 MILWAUKEE WI 53203-2918

Purpose of Disbursement  
 UTILITIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
 01 / 19 / 2015

**Transaction ID : SB21B.I21237**

Amount of Each Disbursement this Period

51.78

Full Name (Last, First, Middle Initial)

## **C. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
 SAN FRANCISCO CA 94105

Purpose of Disbursement  
 CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
 01 / 20 / 2015

**Transaction ID : SB21B.I21186**

Amount of Each Disbursement this Period

2.15

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

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

2124.43

**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 40 OF 84

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. PIRYX**

Mailing Address 85 NATOMA STREET

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| SAN FRANCISCO | CA    | 94105    |

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

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 |
| 01    |   | 21    |   | 2015        |

Transaction ID : SB21B.I21187

Amount of Each Disbursement this Period

|      |
|------|
| 6.46 |
|------|

Full Name (Last, First, Middle Initial)

**B. SOCEKA PROPERTIES**

Mailing Address ATTN: JACK

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| FITCHBURG | WI    | 53711    |

Purpose of Disbursement  
OFFICE RENT

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 |
| 01    |   | 21    |   | 2015        |

Transaction ID : SB21B.I21219

Amount of Each Disbursement this Period

|         |
|---------|
| 1740.00 |
|---------|

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| SAN FRANCISCO | CA    | 94105    |

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

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 |
| 01    |   | 22    |   | 2015        |

Transaction ID : SB21B.I21188

Amount of Each Disbursement this Period

|       |
|-------|
| 95.57 |
|-------|

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

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

|         |
|---------|
| 1842.03 |
|---------|

|  |
|--|
|  |
|--|

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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. PIRYX

Category/  
Type

134.44

State:  District:

## B. PIRYX

Category/  
Type

29.00

State:  District:

### C. AMERICAN LIBERTY GROUP

Category/  
Type

4549.00

State:  District:

4712.44

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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. PIRYX

The three 3x3 grids are as follows:

|   |  |   |
|---|--|---|
| M |  | M |
|   |  |   |
|   |  |   |

01

|   |  |   |
|---|--|---|
| D |  | D |
|   |  |   |
|   |  |   |

26

|   |  |   |  |   |  |   |  |   |
|---|--|---|--|---|--|---|--|---|
| Y |  | Y |  | Y |  | Y |  | Y |
|   |  |   |  |   |  |   |  |   |
|   |  |   |  |   |  |   |  |   |

2015Category/  
Type

157.40

State:  District:

## B. CMDI

01 / 27 / 2015

Category/  
Type

902.50

State:  District:

**C. HEINZEN PRINTING INC.**

Three digital displays are shown, each with a grid of small squares above the digits. The first display shows '01' with two squares above the '0' and two above the '1'. The second display shows '27' with one square above the '2' and one above the '7'. The third display shows '2015' with one square above each digit: '2', '0', '1', and '5'.

Category/  
Type

1368.34

State:  District:

2428.24



|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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. WEST BEND MUTUAL

Date of Disbursement

Transaction ID : SB21B.I21212

Category/  
Type

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

Amount of Each Disbursement this Period

3485.57

## B. PIRYX

Date of Disbursement

M M / D D / Y Y Y Y  
01 28 2015

Transaction ID : SB21B.I21193

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For:

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

Date of Disbursement

### C. AMERICAN LIBERTY GROUP

Transaction ID : SB21B.I21210

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For:

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

State:  District:

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

15668.98

**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 46 OF 84

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. SOUTHWEST PUBLISHING & MAILING CORP**

Mailing Address 4000 SE ADAMS STREET

City  
TOPEKAState  
KSZip Code  
66609Purpose of Disbursement  
DIRECT MAIL - NOT FEA

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 Y |
| 01    |   | 30    |   | 2015        |

Transaction ID : SB21B.I21203

Amount of Each Disbursement this Period

|          |
|----------|
| 11881.00 |
|----------|

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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 Y |
|       |   |       |   |             |

Amount of Each Disbursement this Period

|  |
|--|
|  |
|--|

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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 Y |
|       |   |       |   |             |

Amount of Each Disbursement this Period

|  |
|--|
|  |
|--|

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

|          |
|----------|
| 11881.00 |
|----------|

|           |
|-----------|
| 117260.91 |
|-----------|

**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 47 OF 84

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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. ASSURANT EMPLOYEE BENEFITS**

Mailing Address P.O. BOX 807009

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| KANSAS CITY | MO    | 64184    |

Purpose of Disbursement  
EMPLOYEE BENEFITS

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 |
| 01    |   | 07    |   | 2015        |

Transaction ID : SB30B.I21290

Amount of Each Disbursement this Period

|        |
|--------|
| 178.54 |
|--------|

Full Name (Last, First, Middle Initial)

**B. DEAN CARE**

Mailing Address P.O. BOX 673111

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| CHICAGO | IL    | 60695    |

Purpose of Disbursement  
HEALTH INSURANCE

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 |
| 01    |   | 07    |   | 2015        |

Transaction ID : SB30B.I21292

Amount of Each Disbursement this Period

|         |
|---------|
| 5585.42 |
|---------|

Full Name (Last, First, Middle Initial)

**C. DEAN CARE**

Mailing Address P.O. BOX 673111

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| CHICAGO | IL    | 60695    |

Purpose of Disbursement  
HEALTH INSURANCE

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 |
| 01    |   | 07    |   | 2015        |

Transaction ID : SB30B.I21294

Amount of Each Disbursement this Period

|         |
|---------|
| 1766.11 |
|---------|

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

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

|         |
|---------|
| 7530.07 |
|---------|

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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 48 OF 84

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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. DELTA DENTAL**

Mailing Address P.O. BOX 828

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| STEVENS POINT | WI    | 54481    |

Purpose of Disbursement  
DENTAL INSURANCE

Candidate Name

|                |   |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><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 |
| 01    |   | 07    |   | 2015        |

Transaction ID : SB30B.I21296

Amount of Each Disbursement this Period

|        |
|--------|
| 314.65 |
|--------|

Full Name (Last, First, Middle Initial)

**B. DANIEL BORKHUS**

Mailing Address 403 W DOTY STREET

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

Purpose of Disbursement  
PAYROLL

Candidate Name

|                |   |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><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 |
| 01    |   | 15    |   | 2015        |

Transaction ID : SB30B.I21256

Amount of Each Disbursement this Period

|        |
|--------|
| 215.68 |
|--------|

Full Name (Last, First, Middle Initial)

**C. RICHARD DICKIE**

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<br><input type="checkbox"/> Senate<br><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 |
| 01    |   | 15    |   | 2015        |

Transaction ID : SB30B.I21280

Amount of Each Disbursement this Period

|         |
|---------|
| 1152.21 |
|---------|

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

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

|         |
|---------|
| 1682.54 |
|---------|

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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 49 OF 84

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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    | State | Zip Code |
| MADISON | WI    | 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 |
| 01    |   | 15    |   | 2015        |

Transaction ID : SB30B.I21264

Amount of Each Disbursement this Period

|         |
|---------|
| 1256.82 |
|---------|

Full Name (Last, First, Middle Initial)

**B. JOSEPH FADNESS**

Mailing Address 9506 S RYAN GREEN CT

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| FRANKLIN | WI    | 53132-2237 |

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 |
| 01    |   | 15    |   | 2015        |

Transaction ID : SB30B.I21270

Amount of Each Disbursement this Period

|         |
|---------|
| 2835.73 |
|---------|

Full Name (Last, First, Middle Initial)

**C. JOHN FOSTER**

Mailing Address 2416 E WASHINGTON AVENUE

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| MADISON | WI    | 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 |
| 01    |   | 15    |   | 2015        |

Transaction ID : SB30B.I21266

Amount of Each Disbursement this Period

|        |
|--------|
| 449.10 |
|--------|

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

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

|         |
|---------|
| 4541.65 |
|---------|

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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 50 OF 84

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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. BEN GILES**

Mailing Address 1510 TRIPP CIRCLE

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| MADISON | WI    | 53706    |

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 |
| 01    |   | 15    |   | 2015        |

Transaction ID : SB30B.I21248

Amount of Each Disbursement this Period

|        |
|--------|
| 316.86 |
|--------|

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 Y |
| 01    |   | 15    |   | 2015        |

Transaction ID : SB30B.I21245

Amount of Each Disbursement this Period

|         |
|---------|
| 1282.73 |
|---------|

Full Name (Last, First, Middle Initial)

**C. MARTHA GRAVLEE**

Mailing Address 2907 BIG TIMBER CIRCLE

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| SUAMICO | WI    | 54313    |

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 |
| 01    |   | 15    |   | 2015        |

Transaction ID : SB30B.I21276

Amount of Each Disbursement this Period

|         |
|---------|
| 1315.48 |
|---------|

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

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

|         |
|---------|
| 2915.07 |
|---------|

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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 51 OF 84

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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. AMY HASENBERG**

Mailing Address 217 S MILLS STREET

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>MADISON | State<br>WI | Zip Code<br>53715 |
|-----------------|-------------|-------------------|

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 |
| 01    |   | 15    |   | 2015        |

**Transaction ID : SB30B.I21243**

Amount of Each Disbursement this Period

|        |
|--------|
| 187.46 |
|--------|

Full Name (Last, First, Middle Initial)

**B. BENJAMIN HEATH**

Mailing Address 3301 OAK KNOLL DRIVE

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>EAU CLAIRE | State<br>WI | Zip Code<br>54701 |
|--------------------|-------------|-------------------|

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 |
| 01    |   | 15    |   | 2015        |

**Transaction ID : SB30B.I21250**

Amount of Each Disbursement this Period

|         |
|---------|
| 1263.65 |
|---------|

Full Name (Last, First, Middle Initial)

**C. DONNA HEIMBACH**

Mailing Address 3002 DIANNE DRIVE

|                   |             |                        |
|-------------------|-------------|------------------------|
| City<br>MIDDLETON | State<br>WI | Zip Code<br>53562-2425 |
|-------------------|-------------|------------------------|

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 |
| 01    |   | 15    |   | 2015        |

**Transaction ID : SB30B.I21258**

Amount of Each Disbursement this Period

|        |
|--------|
| 499.36 |
|--------|

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

|         |
|---------|
| 1950.47 |
|---------|

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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 52 OF 84

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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 Y |
| 01    |   | 15    |   | 2015        |

Transaction ID : SB30B.I21268

Amount of Each Disbursement this Period

|         |
|---------|
| 1494.68 |
|---------|

Full Name (Last, First, Middle Initial)

**B. LARRY 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 Y |
| 01    |   | 15    |   | 2015        |

Transaction ID : SB30B.I21274

Amount of Each Disbursement this Period

|        |
|--------|
| 294.32 |
|--------|

Full Name (Last, First, Middle Initial)

**C. ALEXANDER MANDRY**

Mailing Address 513 LEWIS STREET

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| BURLINGTO | WI    | 53105    |

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 |
| 01    |   | 15    |   | 2015        |

Transaction ID : SB30B.I21241

Amount of Each Disbursement this Period

|        |
|--------|
| 343.13 |
|--------|

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

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

|         |
|---------|
| 2132.13 |
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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)

PAGE 53 OF 84

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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. CHRISTOPHER MARTIN**

Mailing Address 100 CORRINA BOULEVARD

City  
WAUKESHAState  
WIZip Code  
53186Purpose 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 |
| 01    |   | 15    |   | 2015        |

Transaction ID : SB30B.I21254

Amount of Each Disbursement this Period

|         |
|---------|
| 1530.64 |
|---------|

Full Name (Last, First, Middle Initial)

**B. HANNAH O' CONNOR**

Mailing Address 2200 MEADOW GREEN

City  
STOUGHTONState  
WIZip Code  
53589Purpose 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 |
| 01    |   | 15    |   | 2015        |

Transaction ID : SB30B.I21260

Amount of Each Disbursement this Period

|        |
|--------|
| 944.70 |
|--------|

Full Name (Last, First, Middle Initial)

**C. RAMON ORTIZ**

Mailing Address 5110 CAMDEN ROAD

City  
MADISONState  
WIZip Code  
53716Purpose 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 |
| 01    |   | 15    |   | 2015        |

Transaction ID : SB30B.I21278

Amount of Each Disbursement this Period

|        |
|--------|
| 311.16 |
|--------|

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

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

|         |
|---------|
| 2786.50 |
|---------|

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|  |     |  |     |  |     |  |     |  |    |  |     |
|--|-----|--|-----|--|-----|--|-----|--|----|--|-----|
|  | 21b |  | 22  |  | 23  |  | 24  |  | 25 |  | 26  |
|  | 27  |  | 28a |  | 28b |  | 28c |  | 29 |  | 30b |

Republican Party of Wisconsin

### A. SCOTT POOLE

Three 7-segment displays are shown, each with a label above it. The first display is labeled 'M M' and shows the number '01'. The second display is labeled 'D D' and shows the number '15'. The third display is labeled 'Y Y Y Y' and shows the year '2015'. The displays are arranged horizontally and separated by slashes.

Category/  
Type

179.24

State:  District:

## B. JAMES SAPP

Category/  
Type

1315.48

State:  District:

C. CARL STOLTE

Category/  
Type

144.37

State:  District:

1639.09

|  |     |  |     |  |     |  |     |  |    |  |     |
|--|-----|--|-----|--|-----|--|-----|--|----|--|-----|
|  | 21b |  | 22  |  | 23  |  | 24  |  | 25 |  | 26  |
|  | 27  |  | 28a |  | 28b |  | 28c |  | 29 |  | 30b |

Republican Party of Wisconsin

### A. JOSHUA WILSON

Three 7-segment displays are shown, each with a label above it. The first display is labeled 'M M' and shows the number '01'. The second display is labeled 'D D' and shows the number '15'. The third display is labeled 'Y Y Y Y' and shows the year '2015'. The displays are arranged horizontally and separated by slashes.

Category/  
Type

293.32

State:  District:

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Category/  
Type

7374.74

State:  District:

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Category/  
Type

303.60

State:  District:

7971.66

|                          |     |                          |     |                          |     |                          |     |                          |    |                                     |     |
|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|-------------------------------------|-----|
| <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 |

# Republican Party of Wisconsin

**A. ACCOUNTANTS WORLD PAYROLL LLC**

Category/  
Type

10.83

State:  District:

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Category/  
Type

28.00

State:  District:

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Category/  
Type

86.00

State:  District:



124.83

A diagram of a rectangular frame structure. It consists of two horizontal bars at the top and bottom, and twelve vertical bars connecting them. The vertical bars are evenly spaced along the length of the frame.

|  |     |  |     |  |     |  |     |  |    |   |     |
|--|-----|--|-----|--|-----|--|-----|--|----|---|-----|
|  | 21b |  | 22  |  | 23  |  | 24  |  | 25 |   | 26  |
|  | 27  |  | 28a |  | 28b |  | 28c |  | 29 | X | 30b |

Republican Party of Wisconsin

## A. AMERICAN FUNDS SERVICE COMPANY

Date of Disbursement

Three 7-segment displays are shown, each with a label above it. The first display is labeled 'M M' and shows the number '01'. The second display is labeled 'D D' and shows the number '15'. The third display is labeled 'Y Y Y Y' and shows the year '2015'. The displays are arranged horizontally and separated by slashes.

Transaction ID : SB30B.I21285

Category/  
Type

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

State:  District:

Amount of Each Disbursement this Period

## B. AMERICAN FUNDS SERVICE COMPANY

Date of Disbursement

Transaction ID : SB30B.I21286

Category/  
Type

Disbursement For:

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

State:  District:

Amount of Each Disbursement this Period

| Age Group | Percentage |
|-----------|------------|
| 18-24     | 80.23      |
| 25-34     | ~15        |
| 35-44     | ~10        |
| 45-54     | ~10        |
| 55-64     | ~10        |
| 65-74     | ~10        |
| 75-84     | ~10        |
| 85+       | ~10        |

### C. AMERICAN FUNDS SERVICE COMPANY

Date of Disbursement



Transaction ID : SB30B.I21287

Category/  
Type

Disbursement For:

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

State:  District:

Amount of Each Disbursement this Period

55.80

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

235.98

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

|  |     |  |     |  |     |  |     |  |    |   |     |
|--|-----|--|-----|--|-----|--|-----|--|----|---|-----|
|  | 21b |  | 22  |  | 23  |  | 24  |  | 25 |   | 26  |
|  | 27  |  | 28a |  | 28b |  | 28c |  | 29 | X | 30b |

Republican Party of Wisconsin

## A. EMPLOYEE BENEFITS CORPORATION

Date of Disbursement

Transaction ID : SB30B.I21298

Category/  
Type

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

Amount of Each Disbursement this Period

250.00

## B. ASSURANT EMPLOYEE BENEFITS

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB30B.I21291

Category/  
Type

Disbursement For:

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

Amount of Each Disbursement this Period

| Age Group | Number of People |
|-----------|------------------|
| 13-17     | 178.54           |
| 18-24     | 150.00           |
| 25-34     | 125.00           |
| 35-44     | 100.00           |
| 45-54     | 75.00            |
| 55-64     | 50.00            |
| 65-74     | 25.00            |
| 75-84     | 12.50            |
| 85+       | 6.25             |

### C. DELTA DENTAL

Date of Disbursement

M M / D D / Y Y Y Y  
01 27 2015

Transaction ID : SB30B.I21297

Category/  
Type

Disbursement For:

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

Amount of Each Disbursement this Period

314.65

743.19

**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 59 OF 84

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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. DEAN CARE**

Mailing Address P.O. BOX 673111

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| CHICAGO | IL    | 60695    |

Purpose of Disbursement  
HEALTH INSURANCE

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 |
| 01    |   | 28    |   | 2015      |

Transaction ID : SB30B.I21293

Amount of Each Disbursement this Period

|         |
|---------|
| 5585.42 |
|---------|

Full Name (Last, First, Middle Initial)

**B. DEAN CARE**

Mailing Address P.O. BOX 673111

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| CHICAGO | IL    | 60695    |

Purpose of Disbursement  
HEALTH INSURANCE

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 |
| 01    |   | 28    |   | 2015      |

Transaction ID : SB30B.I21295

Amount of Each Disbursement this Period

|         |
|---------|
| 1766.11 |
|---------|

Full Name (Last, First, Middle Initial)

**C. DANIEL BORKHUS**

Mailing Address 403 W DOTY STREET

|         |       |          |
|---------|-------|----------|
| 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 |
| 01    |   | 30    |   | 2015      |

Transaction ID : SB30B.I21257

Amount of Each Disbursement this Period

|        |
|--------|
| 265.50 |
|--------|

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

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

|         |
|---------|
| 7617.03 |
|---------|

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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 60 OF 84

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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. RICHARD DICKIE**

Mailing Address 126 N. BLAIR ST. #1

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 Y |
| 01    |   | 30    |   | 2015        |

Transaction ID : SB30B.I21281

Amount of Each Disbursement this Period

|         |
|---------|
| 1164.77 |
|---------|

Full Name (Last, First, Middle Initial)

**B. JESSE DOUGHERTY**

Mailing Address 5203 AUTUMN LEAF LANE

City  
MADISONState  
WIZip Code  
53704Purpose 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 Y |
| 01    |   | 30    |   | 2015        |

Transaction ID : SB30B.I21265

Amount of Each Disbursement this Period

|         |
|---------|
| 1575.07 |
|---------|

Full Name (Last, First, Middle Initial)

**C. JOSEPH FADNESS**

Mailing Address 9506 S RYAN GREEN CT

City  
FRANKLINState  
WIZip Code  
53132-2237Purpose 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 Y |
| 01    |   | 30    |   | 2015        |

Transaction ID : SB30B.I21271

Amount of Each Disbursement this Period

|         |
|---------|
| 2835.74 |
|---------|

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

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

|         |
|---------|
| 5575.58 |
|---------|

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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)

PAGE 61 OF 84

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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. JOHN FOSTER**

Mailing Address 2416 E WASHINGTON AVENUE

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>MADISON | State<br>WI | Zip Code<br>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 |
| 01    |   | 30    |   | 2015        |

Transaction ID : SB30B.I21267

Amount of Each Disbursement this Period

|        |
|--------|
| 703.96 |
|--------|

Full Name (Last, First, Middle Initial)

**B. BEN GILES**

Mailing Address 1510 TRIPP CIRCLE

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>MADISON | State<br>WI | Zip Code<br>53706 |
|-----------------|-------------|-------------------|

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 |
| 01    |   | 30    |   | 2015        |

Transaction ID : SB30B.I21249

Amount of Each Disbursement this Period

|        |
|--------|
| 338.79 |
|--------|

Full Name (Last, First, Middle Initial)

**C. ANDREW GOWDY**

Mailing Address W279 N5886 WALNUT GROVE DR.

|                |             |                   |
|----------------|-------------|-------------------|
| City<br>SUSSEX | State<br>WI | Zip Code<br>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 Y |
| 01    |   | 30    |   | 2015        |

Transaction ID : SB30B.I21246

Amount of Each Disbursement this Period

|         |
|---------|
| 1718.18 |
|---------|

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

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

|         |
|---------|
| 2760.93 |
|---------|

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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 62 OF 84

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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. ANDREW GOWDY**

Mailing Address W279 N5886 WALNUT GROVE DR.

City  
SUSSEXState  
WIZip Code  
53089Purpose 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 |
| 01    |   | 30    |   | 2015        |

Transaction ID : SB30B.I21247

Amount of Each Disbursement this Period

|         |
|---------|
| 1194.30 |
|---------|

Full Name (Last, First, Middle Initial)

**B. HYVEE**

Mailing Address 675 S WHITNEY WAY

City  
MADISONState  
WIZip Code  
53717Purpose of Disbursement  
STAFF LUNCHES

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 |
| 11    |   | 14    |   | 2014        |

Transaction ID : SB30B.I21319

Amount of Each Disbursement this Period

|        |
|--------|
| 126.00 |
|--------|

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. INTERSTATE PARKING**

Mailing Address 555 NORTH PLANKINTON AVENUE

City  
MILWAUKEEState  
WIZip Code  
53203Purpose of Disbursement  
PARKING

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 |
| 12    |   | 06    |   | 2014        |

Transaction ID : SB30B.I21318

Amount of Each Disbursement this Period

|      |
|------|
| 5.00 |
|------|

[MEMO ITEM]

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

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

|         |
|---------|
| 1194.30 |
|---------|

|  |
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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 63 OF 84

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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. ISAAC'S PARKING SERVICE**

Mailing Address 330 W WELLS STREET

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| MILWAUKEE | WI    | 53203    |

Purpose of Disbursement  
PARKING

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 |
| 02    |   | 20    |   | 2014      |

Transaction ID : SB30B.I21314

Amount of Each Disbursement this Period

|       |
|-------|
| 15.00 |
|-------|

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. ISAAC'S PARKING SERVICE**

Mailing Address 330 W WELLS STREET

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| MILWAUKEE | WI    | 53203    |

Purpose of Disbursement  
PARKING

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 |
| 04    |   | 05    |   | 2014      |

Transaction ID : SB30B.I21316

Amount of Each Disbursement this Period

|       |
|-------|
| 25.00 |
|-------|

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. ISAAC'S PARKING SERVICE**

Mailing Address 330 W WELLS STREET

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| MILWAUKEE | WI    | 53203    |

Purpose of Disbursement  
PARKING

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 |
| 05    |   | 04    |   | 2014      |

Transaction ID : SB30B.I21317

Amount of Each Disbursement this Period

|       |
|-------|
| 75.00 |
|-------|

[MEMO ITEM]

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

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

|      |
|------|
| 0.00 |
|------|

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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 64 OF 84

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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 |
| 01    |   | 30    |   | 2015        |

Transaction ID : SB30B.I21313

Amount of Each Disbursement this Period

|        |
|--------|
| 933.30 |
|--------|

[MEMO ITEM]

**B. WISCONSIN CENTER DISTRICT**

Full Name (Last, First, Middle Initial)

Mailing Address 500 W WELLS

City State Zip Code  
MILWAUKEE WI 53203Purpose of Disbursement  
PARKING

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 |
| 03    |   | 12    |   | 2014        |

Transaction ID : SB30B.I21315

Amount of Each Disbursement this Period

|       |
|-------|
| 15.00 |
|-------|

[MEMO ITEM]

**C. MARTHA GRAVLEE**

Full Name (Last, First, Middle Initial)

Mailing Address 2907 BIG TIMBER CIRCLE

City State Zip Code  
SUAMICO WI 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 Y |
| 01    |   | 30    |   | 2015        |

Transaction ID : SB30B.I21277

Amount of Each Disbursement this Period

|         |
|---------|
| 1315.48 |
|---------|

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

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

|         |
|---------|
| 1315.48 |
|---------|

|  |
|--|
|  |
|--|



**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 66 OF 84

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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 Y |
| 01    | / | 30    | / | 2015        |

Transaction ID : SB30B.I21269

Amount of Each Disbursement this Period

|         |
|---------|
| 1494.70 |
|---------|

Full Name (Last, First, Middle Initial)

**B. LARRY 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 Y |
| 01    | / | 30    | / | 2015        |

Transaction ID : SB30B.I21275

Amount of Each Disbursement this Period

|        |
|--------|
| 485.49 |
|--------|

Full Name (Last, First, Middle Initial)

**C. ALEXANDER MANDRY**

Mailing Address 513 LEWIS STREET

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| BURLINGTO | WI    | 53105    |

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 |
| 01    | / | 30    | / | 2015        |

Transaction ID : SB30B.I21242

Amount of Each Disbursement this Period

|        |
|--------|
| 463.64 |
|--------|

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

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

|         |
|---------|
| 2443.83 |
|---------|

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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 84

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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. CHRISTOPHER MARTIN**

Mailing Address 100 CORRINA BOULEVARD

City  
WAUKESHAState  
WIZip Code  
53186Purpose 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 |
| 01    |   | 30    |   | 2015        |

Transaction ID : SB30B.I21255

Amount of Each Disbursement this Period

|         |
|---------|
| 1530.65 |
|---------|

Full Name (Last, First, Middle Initial)

**B. HANNAH O' CONNOR**

Mailing Address 2200 MEADOW GREEN

City  
STOUGHTONState  
WIZip Code  
53589Purpose 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 |
| 01    |   | 30    |   | 2015        |

Transaction ID : SB30B.I21261

Amount of Each Disbursement this Period

|        |
|--------|
| 944.69 |
|--------|

Full Name (Last, First, Middle Initial)

**C. RAMON ORTIZ**

Mailing Address 5110 CAMDEN ROAD

City  
MADISONState  
WIZip Code  
53716Purpose 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 |
| 01    |   | 30    |   | 2015        |

Transaction ID : SB30B.I21279

Amount of Each Disbursement this Period

|        |
|--------|
| 317.04 |
|--------|

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

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

|         |
|---------|
| 2792.38 |
|---------|

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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 68 OF 84

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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. SCOTT POOLE**

Mailing Address 1528 SELLERY STREET

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 Y |
| 01    |   | 30    |   | 2015        |

Transaction ID : SB30B.I21283

Amount of Each Disbursement this Period

|        |
|--------|
| 654.86 |
|--------|

Full Name (Last, First, Middle Initial)

**B. JAMES SAPP**

Mailing Address 134 FALLING WATERS LANE

City  
MAYLENEState  
ALZip Code  
35114Purpose 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 Y |
| 01    |   | 30    |   | 2015        |

Transaction ID : SB30B.I21263

Amount of Each Disbursement this Period

|         |
|---------|
| 1437.42 |
|---------|

Full Name (Last, First, Middle Initial)

**C. 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 Y |
| 01    |   | 30    |   | 2015        |

Transaction ID : SB30B.I21253

Amount of Each Disbursement this Period

|        |
|--------|
| 179.27 |
|--------|

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

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

|         |
|---------|
| 2271.55 |
|---------|

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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 69 OF 84

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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 WILSON**

Mailing Address 641 W. MAIN STREET

City  
MADISONState  
WIZip Code  
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 |
| 01    |   | 30    |   | 2015      |

Transaction ID : SB30B.I21273

Amount of Each Disbursement this Period

|        |
|--------|
| 506.05 |
|--------|

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL TAX

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 |
| 01    |   | 30    |   | 2015      |

Transaction ID : SB30B.I21325

Amount of Each Disbursement this Period

|         |
|---------|
| 7108.50 |
|---------|

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL TAX

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 |
| 01    |   | 30    |   | 2015      |

Transaction ID : SB30B.I21326

Amount of Each Disbursement this Period

|        |
|--------|
| 337.43 |
|--------|

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

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

|         |
|---------|
| 7951.98 |
|---------|

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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 |

Republican Party of Wisconsin

**A. ACCOUNTANTS WORLD PAYROLL LLC**



Three 7-segment displays are shown, each with a label above it. The first display shows '01', the second shows '30', and the third shows '2015'. Each display has a label above it: 'M M' for the first, 'D D' for the second, and 'Y Y Y Y' for the third.

Category/  
Type

10.83

State:  District:

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Category/  
Type

66.80

State:  District:

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Category/  
Type

86.00

State:  District:

| Age Group | Percentage |
|-----------|------------|
| 18-24     | 163.63     |
| 25-34     | 145.45     |
| 35-44     | 127.27     |
| 45-54     | 109.09     |
| 55-64     | 90.91      |
| 65-74     | 72.73      |
| 75-84     | 54.55      |
| 85+       | 36.36      |

**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 71 OF 84

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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 |
| 01    |   | 30    |   | 2015        |

Mailing Address 140 FELL COURT

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| HAUPPAUGE | NY    | 11788    |

Transaction ID : SB30B.I21330

Purpose of Disbursement  
PAYROLL TAX

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1280.63

|                |                                    |
|----------------|------------------------------------|
| 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. AMERICAN FUNDS SERVICE COMPANY**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 01    |   | 30    |   | 2015        |

Mailing Address BOX 6164

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| INDIANAPOLIS | IN    | 46206-6164 |

Transaction ID : SB30B.I21288

Purpose of Disbursement  
EMPLOYEE SIMPLE IRA

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

161.98

|                |                                    |
|----------------|------------------------------------|
| 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. AMERICAN FUNDS SERVICE COMPANY**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 01    |   | 30    |   | 2015        |

Mailing Address BOX 6164

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| INDIANAPOLIS | IN    | 46206-6164 |

Transaction ID : SB30B.I21289

Purpose of Disbursement  
EMPLOYEE SIMPLE IRA

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

109.75

|                |                                    |
|----------------|------------------------------------|
| 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).....▶

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

1552.36

72048.11

**SCHEDULE H1 (FEC Form 3X)****METHOD OF ALLOCATION FOR:**

- **ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)** (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Transaction ID : MCW021815A

**USE ONLY ONE SECTION, A or B****A. State and Local Party Committees****Fixed Percentage (select one)**

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- ☒ Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees****Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐

**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %

Nonfederal .....  %

This ratio applies to (check all that apply):

Administrative ☐      Generic Voter Drive ☐      Public Communications Referencing Party Only ☐

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 73 OF 84

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 Republican Party of Wisconsin

## NAME OF ACCOUNT

Republican Party of Wisconsin - State Account

## DATE OF RECEIPT

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 1 | 2 |   | 2 | 0 | 1 | 5 |

## TOTAL AMOUNT TRANSFERRED

14808.68

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

5656.24

Transaction ID : 021815Z

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 74 OF 84

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

## NAME OF ACCOUNT

Republican Party of Wisconsin - State Account

## DATE OF RECEIPT

M M / D D / Y Y Y Y Y  
01 / 21 / 2015

## TOTAL AMOUNT TRANSFERRED

14808.68

## BREAKDOWN OF TRANSFER RECEIVED

i) **Total Administrative** .....

8574.18

Transaction ID : AA021815

ii) **Generic Voter Drive** .....iii) **Exempt Activities**.....iv) **Direct Fundraising** (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) **Direct Candidate Support** (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) **Public Communications Referring Only to Party** (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

**TOTAL** This Period (Administrative) .....**TOTAL** This Period (Generic Voter Drive) .....**TOTAL** This Period (Exempt Activities) .....**TOTAL** This Period (Direct Fundraising) .....**TOTAL** This Period (Direct Candidate Support) .....**TOTAL** This Period (Public Communications Referring Only to Party) .....**TOTAL** This Period (Total Amount Transferred).....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 75 OF 84

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 Republican Party of Wisconsin

NAME OF ACCOUNT  
 Republican Party of Wisconsin

DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2015

TOTAL AMOUNT TRANSFERRED

14808.68

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

578.26

Transaction ID : BB021815

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

14808.68

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

0.00

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred).....

44426.04

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 76 OF 84

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

|   |             |                                 |                  |  |                |
|---|-------------|---------------------------------|------------------|--|----------------|
| <b>A. Full Name (Last, First, Middle Initial)</b><br><b>Advanced Disposal</b> |             | <b>Transaction ID : A021815</b> |                  | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |                |
| Mailing Address PO Box 74008053   |             |                                 |                  | Allocated Activity or Event Year-To-Date<br>213.63   |                |
| City<br>Chicago   | State<br>IL | Zip Code<br>60674               |                  | Date<br>MM / DD / YYYY<br>01 / 21 / 2015   |                |
| Purpose of Disbursement:<br>Waste Removal                                     |             | Category/<br>Type               |                  |  |                |
| Activity or Event Identifier:   |             |                                 |                  |  |                |
| FEDERAL SHARE   |             | +                               | NONFEDERAL SHARE |  | = TOTAL AMOUNT |
| 32.04   |             |                                 | 181.59           |  | 213.63         |

|   |             |                                 |                  |  |                |
|---|-------------|---------------------------------|------------------|--|----------------|
| <b>B. Full Name (Last, First, Middle Initial)</b><br><b>AT&amp;T Mobility</b> |             | <b>Transaction ID : B021815</b> |                  | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |                |
| Mailing Address PO Box 6463   |             |                                 |                  | Allocated Activity or Event Year-To-Date<br>1310.42  |                |
| City<br>Carol Stream  | State<br>IL | Zip Code<br>60197               |                  | Date<br>MM / DD / YYYY<br>01 / 21 / 2015   |                |
| Purpose of Disbursement:<br>Phones  |             | Category/<br>Type               |                  |  |                |
| Activity or Event Identifier:   |             |                                 |                  |  |                |
| FEDERAL SHARE   |             | +                               | NONFEDERAL SHARE |  | = TOTAL AMOUNT |
| 196.56  |             |                                 | 1113.86          |  | 1310.42        |

|  |             |                                 |                  |  |                |
|--|-------------|---------------------------------|------------------|--|----------------|
| <b>C. Full Name (Last, First, Middle Initial)</b><br><b>Badgerland Chemical &amp; Supply</b> |             | <b>Transaction ID : C021815</b> |                  | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |                |
| Mailing Address PO Box 620303  |             |                                 |                  | Allocated Activity or Event Year-To-Date<br>155.35   |                |
| City<br>Middleton  | State<br>WI | Zip Code<br>53562               |                  | Date<br>MM / DD / YYYY<br>01 / 27 / 2015   |                |
| Purpose of Disbursement:<br>Custodial Supplies   |             | Category/<br>Type               |                  |  |                |
| Activity or Event Identifier:  |             |                                 |                  |  |                |
| FEDERAL SHARE  |             | +                               | NONFEDERAL SHARE |  | = TOTAL AMOUNT |
| 23.30  |             |                                 | 132.05           |  | 155.35         |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 251.90        |   | 1427.50          |   | 1679.40      |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

|               |                  |              |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
|               |                  |              |

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 77 OF 84

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

|   |  |             |                                 |                   |  |  |  |              |
|---|--|-------------|---------------------------------|-------------------|--|--|--|--------------|
| <b>A. Full Name (Last, First, Middle Initial)</b><br><b>Century Springs Bottling Co</b> |  |             | <b>Transaction ID : D021815</b> |                   |  | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |              |
| Mailing Address PO Box 275  |  |             |                                 |                   |  |  |  |              |
| City<br>Genesee Depot   |  | State<br>WI |                                 | Zip Code<br>53127 |  |  |  |              |
| Purpose of Disbursement:<br>Bottled Water   |  |             |                                 | Category/<br>Type |  | Allocated Activity or Event Year-To-Date<br>20.00  |  |              |
| Activity or Event Identifier:   |  |             |                                 |                   |  | Date <input type="text" value="01"/> / <input type="text" value="21"/> / <input type="text" value="2015"/>   |  |              |
| FEDERAL SHARE   |  | +           |                                 | NONFEDERAL SHARE  |  | =  |  | TOTAL AMOUNT |
| 3.00  |  |             |                                 | 17.00             |  |  |  | 20.00        |

|   |  |             |                                 |                   |  |  |  |              |
|---|--|-------------|---------------------------------|-------------------|--|--|--|--------------|
| <b>B. Full Name (Last, First, Middle Initial)</b><br><b>Charter</b> |  |             | <b>Transaction ID : E021815</b> |                   |  | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |              |
| Mailing Address PO Box 2981   |  |             |                                 |                   |  |  |  |              |
| City<br>Milwaukee   |  | State<br>WI |                                 | Zip Code<br>53201 |  |  |  |              |
| Purpose of Disbursement:<br>Cable                                   |  |             |                                 | Category/<br>Type |  | Allocated Activity or Event Year-To-Date<br>223.93   |  |              |
| Activity or Event Identifier:                                       |  |             |                                 |                   |  | Date <input type="text" value="01"/> / <input type="text" value="21"/> / <input type="text" value="2015"/>   |  |              |
| FEDERAL SHARE   |  | +           |                                 | NONFEDERAL SHARE  |  | =  |  | TOTAL AMOUNT |
| 33.59   |  |             |                                 | 190.34            |  |  |  | 223.93       |

|   |  |             |                                 |                   |  |  |  |              |
|---|--|-------------|---------------------------------|-------------------|--|--|--|--------------|
| <b>C. Full Name (Last, First, Middle Initial)</b><br><b>Charter</b> |  |             | <b>Transaction ID : F021815</b> |                   |  | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |              |
| Mailing Address PO Box 2981   |  |             |                                 |                   |  |  |  |              |
| City<br>Milwaukee   |  | State<br>WI |                                 | Zip Code<br>53201 |  |  |  |              |
| Purpose of Disbursement:<br>Cable                                   |  |             |                                 | Category/<br>Type |  | Allocated Activity or Event Year-To-Date<br>750.23   |  |              |
| Activity or Event Identifier:                                       |  |             |                                 |                   |  | Date <input type="text" value="01"/> / <input type="text" value="21"/> / <input type="text" value="2015"/>   |  |              |
| FEDERAL SHARE   |  | +           |                                 | NONFEDERAL SHARE  |  | =  |  | TOTAL AMOUNT |
| 112.53  |  |             |                                 | 637.70            |  |  |  | 750.23       |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 149.12        |   | 845.04           |   | 994.16       |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

|               |  |                  |  |              |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE |  | NONFEDERAL SHARE |  | TOTAL AMOUNT |
|               |  |                  |  |              |

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 78 OF 84

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

|  |             |                                 |                  |  |                |
|--|-------------|---------------------------------|------------------|--|----------------|
| <b>A. Full Name (Last, First, Middle Initial)</b><br><b>City Treasurer</b> |             | <b>Transaction ID : G021815</b> |                  | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |                |
| Mailing Address PO Box 2997  |             |                                 |                  |  |                |
| City<br>Madison  | State<br>WI | Zip Code<br>53701               |                  |  |                |
| Purpose of Disbursement:<br>Utilities                                      |             | Category/<br>Type               |                  | Allocated Activity or Event Year-To-Date<br>179.14   |                |
| Activity or Event Identifier:  |             |                                 |                  | Date <input type="text" value="01"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>   |                |
| FEDERAL SHARE  |             | +                               | NONFEDERAL SHARE |  | = TOTAL AMOUNT |
| 26.87  |             |                                 | 152.27           |  | 179.14         |

|   |             |                                 |                  |  |                |
|---|-------------|---------------------------------|------------------|--|----------------|
| <b>B. Full Name (Last, First, Middle Initial)</b><br><b>Coca Cola Enterprises</b> |             | <b>Transaction ID : H021815</b> |                  | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |                |
| Mailing Address 2335 Paysphere Circle   |             |                                 |                  |  |                |
| City<br>Chicago   | State<br>IL | Zip Code<br>60674               |                  |  |                |
| Purpose of Disbursement:<br>Office Soda   |             | Category/<br>Type               |                  | Allocated Activity or Event Year-To-Date<br>21.10  |                |
| Activity or Event Identifier:   |             |                                 |                  | Date <input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2015"/>   |                |
| FEDERAL SHARE   |             | +                               | NONFEDERAL SHARE |  | = TOTAL AMOUNT |
| 3.17  |             |                                 | 17.94            |  | 21.10          |

|   |             |                                 |                  |  |                |
|---|-------------|---------------------------------|------------------|--|----------------|
| <b>C. Full Name (Last, First, Middle Initial)</b><br><b>Comcast</b> |             | <b>Transaction ID : I021815</b> |                  | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |                |
| Mailing Address PO Box 34744  |             |                                 |                  |  |                |
| City<br>Seattle   | State<br>WA | Zip Code<br>98124               |                  |  |                |
| Purpose of Disbursement:<br>Cable                                   |             | Category/<br>Type               |                  | Allocated Activity or Event Year-To-Date<br>126.15   |                |
| Activity or Event Identifier:                                       |             |                                 |                  | Date <input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2015"/>   |                |
| FEDERAL SHARE   |             | +                               | NONFEDERAL SHARE |  | = TOTAL AMOUNT |
| 18.92   |             |                                 | 107.23           |  | 126.15         |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 48.96         |   | 277.44           |   | 326.39       |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

|               |  |                  |  |              |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE |  | NONFEDERAL SHARE |  | TOTAL AMOUNT |
|               |  |                  |  |              |

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 79 OF 84

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

|   |             |                                 |   |                |
|---|-------------|---------------------------------|---|----------------|
| <b>A. Full Name (Last, First, Middle Initial)</b><br><b>Easy Permit Postage</b> |             | <b>Transaction ID : J021815</b> | <b>Allocated Activity or Event:</b><br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |                |
| Mailing Address PO Box 371874   |             |                                 |   |                |
| City<br>Pittsburgh  | State<br>PA | Zip Code<br>15250               |   |                |
| Purpose of Disbursement:<br>Postage for Meter                                   |             |                                 | Allocated Activity or Event Year-To-Date<br>5478.47   |                |
| Activity or Event Identifier:   |             | Category/<br>Type               | Date<br>MM / DD / YYYY<br>01 / 21 / 2015  |                |
| FEDERAL SHARE   |             | +                               | NONFEDERAL SHARE  | = TOTAL AMOUNT |
| 821.77  |             |                                 | 4656.70   | 5478.47        |

|   |             |                                 |   |                |
|---|-------------|---------------------------------|---|----------------|
| <b>B. Full Name (Last, First, Middle Initial)</b><br><b>Impact Acquisitions LLC</b> |             | <b>Transaction ID : K021815</b> | <b>Allocated Activity or Event:</b><br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |                |
| Mailing Address 75 Remittance Drive   |             |                                 |   |                |
| City<br>Chicago   | State<br>IL | Zip Code<br>60675               |   |                |
| Purpose of Disbursement:<br>Office Supplies   |             |                                 | Allocated Activity or Event Year-To-Date<br>20.57   |                |
| Activity or Event Identifier:   |             | Category/<br>Type               | Date<br>MM / DD / YYYY<br>01 / 27 / 2015  |                |
| FEDERAL SHARE   |             | +                               | NONFEDERAL SHARE  | = TOTAL AMOUNT |
| 3.09  |             |                                 | 17.48   | 20.57          |

|  |             |                                 |   |                |
|--|-------------|---------------------------------|---|----------------|
| <b>C. Full Name (Last, First, Middle Initial)</b><br><b>Konica Minolta Premier Finance</b> |             | <b>Transaction ID : L021815</b> | <b>Allocated Activity or Event:</b><br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |                |
| Mailing Address PO Box 740423  |             |                                 |   |                |
| City<br>Atlanta  | State<br>GA | Zip Code<br>30374               |   |                |
| Purpose of Disbursement:<br>Copier Lease   |             |                                 | Allocated Activity or Event Year-To-Date<br>1302.99   |                |
| Activity or Event Identifier:  |             | Category/<br>Type               | Date<br>MM / DD / YYYY<br>01 / 14 / 2015  |                |
| FEDERAL SHARE  |             | +                               | NONFEDERAL SHARE  | = TOTAL AMOUNT |
| 195.45   |             |                                 | 1107.54   | 1302.99        |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1020.31       |   | 5781.72          |   | 6802.03      |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

|               |  |                  |  |              |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE |  | NONFEDERAL SHARE |  | TOTAL AMOUNT |
|               |  |                  |  |              |

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 80 OF 84

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

|  |  |             |                                 |                   |  |  |  |              |
|--|--|-------------|---------------------------------|-------------------|--|--|--|--------------|
| <b>A. Full Name (Last, First, Middle Initial)</b><br><b>Konica Minolta Premier Finance</b> |  |             | <b>Transaction ID : M021815</b> |                   |  | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |              |
| Mailing Address PO Box 740423  |  |             |                                 |                   |  |  |  |              |
| City<br>Atlanta  |  | State<br>GA |                                 | Zip Code<br>30374 |  |  |  |              |
| Purpose of Disbursement:<br>Copier Lease   |  |             |                                 | Category/<br>Type |  | Allocated Activity or Event Year-To-Date<br>1352.25  |  |              |
| Activity or Event Identifier:  |  |             |                                 |                   |  | Date <input type="text" value="01"/> / <input type="text" value="21"/> / <input type="text" value="2015"/>   |  |              |
| FEDERAL SHARE  |  | +           |                                 | NONFEDERAL SHARE  |  | =  |  | TOTAL AMOUNT |
| 202.84   |  |             |                                 | 1149.41           |  |  |  | 1352.25      |

|  |  |             |                                 |                   |  |  |  |              |
|--|--|-------------|---------------------------------|-------------------|--|--|--|--------------|
| <b>B. Full Name (Last, First, Middle Initial)</b><br><b>MG&amp;E</b> |  |             | <b>Transaction ID : N021815</b> |                   |  | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |              |
| Mailing Address PO Box 1231  |  |             |                                 |                   |  |  |  |              |
| City<br>Madison  |  | State<br>WI |                                 | Zip Code<br>53701 |  |  |  |              |
| Purpose of Disbursement:<br>Utilities                                |  |             |                                 | Category/<br>Type |  | Allocated Activity or Event Year-To-Date<br>1592.17  |  |              |
| Activity or Event Identifier:  |  |             |                                 |                   |  | Date <input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2015"/>   |  |              |
| FEDERAL SHARE  |  | +           |                                 | NONFEDERAL SHARE  |  | =  |  | TOTAL AMOUNT |
| 238.83   |  |             |                                 | 1353.34           |  |  |  | 1592.17      |

|  |  |             |                                 |                   |  |  |  |              |
|--|--|-------------|---------------------------------|-------------------|--|--|--|--------------|
| <b>C. Full Name (Last, First, Middle Initial)</b><br><b>Nestle Pure Life</b> |  |             | <b>Transaction ID : O021815</b> |                   |  | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |              |
| Mailing Address PO Box 856680  |  |             |                                 |                   |  |  |  |              |
| City<br>Louisville   |  | State<br>KY |                                 | Zip Code<br>40285 |  |  |  |              |
| Purpose of Disbursement:<br>Office Water                                     |  |             |                                 | Category/<br>Type |  | Allocated Activity or Event Year-To-Date<br>8.74   |  |              |
| Activity or Event Identifier:  |  |             |                                 |                   |  | Date <input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2015"/>   |  |              |
| FEDERAL SHARE  |  | +           |                                 | NONFEDERAL SHARE  |  | =  |  | TOTAL AMOUNT |
| 1.31   |  |             |                                 | 7.43              |  |  |  | 8.74         |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 442.98        |   | 2510.18          |   | 2953.16      |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

|               |  |                  |  |              |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE |  | NONFEDERAL SHARE |  | TOTAL AMOUNT |
|               |  |                  |  |              |

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 81 OF 84

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

|  |             |                                 |  |  |
|--|-------------|---------------------------------|--|--|
| <b>A. Full Name (Last, First, Middle Initial)</b><br><b>Premium Waters Inc</b> |             | <b>Transaction ID : P021815</b> | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| Mailing Address PO Box 9128  |             |                                 |  |  |
| City<br>Minneapolis  | State<br>MN | Zip Code<br>55480               |  |  |
| Purpose of Disbursement:<br>Office Water                                       |             | Category/<br>Type               | Allocated Activity or Event Year-To-Date<br>49.49  |  |
| Activity or Event Identifier:  |             |                                 | Date MM / DD / YYYY<br>01 / 14 / 2015  |  |
| FEDERAL SHARE  |             | +                               | NONFEDERAL SHARE   |  |
| 7.42   |             |                                 | 42.07  |  |
|  |             | =                               | TOTAL AMOUNT   |  |
|  |             |                                 | 49.49  |  |

|  |             |                                 |  |  |
|--|-------------|---------------------------------|--|--|
| <b>B. Full Name (Last, First, Middle Initial)</b><br><b>Pro One Janitorial Inc</b> |             | <b>Transaction ID : Q021815</b> | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| Mailing Address 1101 Ashwaubenon St  |             |                                 |  |  |
| City<br>Green Bay  | State<br>WI | Zip Code<br>54304               |  |  |
| Purpose of Disbursement:<br>Custodial Services                                     |             | Category/<br>Type               | Allocated Activity or Event Year-To-Date<br>500.00   |  |
| Activity or Event Identifier:  |             |                                 | Date MM / DD / YYYY<br>01 / 14 / 2015  |  |
| FEDERAL SHARE  |             | +                               | NONFEDERAL SHARE   |  |
| 75.00  |             |                                 | 425.00   |  |
|  |             | =                               | TOTAL AMOUNT   |  |
|  |             |                                 | 500.00   |  |

|   |             |                                 |  |  |
|---|-------------|---------------------------------|--|--|
| <b>C. Full Name (Last, First, Middle Initial)</b><br><b>TDS</b> |             | <b>Transaction ID : R021815</b> | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |
| Mailing Address PO Box 94510                                    |             |                                 |  |  |
| City<br>Palatine  | State<br>IL | Zip Code<br>60094               |  |  |
| Purpose of Disbursement:<br>Office Phones                       |             | Category/<br>Type               | Allocated Activity or Event Year-To-Date<br>346.10   |  |
| Activity or Event Identifier:                                   |             |                                 | Date MM / DD / YYYY<br>01 / 14 / 2015  |  |
| FEDERAL SHARE   |             | +                               | NONFEDERAL SHARE   |  |
| 51.92   |             |                                 | 294.19   |  |
|   |             | =                               | TOTAL AMOUNT   |  |
|   |             |                                 | 346.10   |  |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 134.34        |   | 761.26           |   | 895.59       |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

|               |                  |              |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
|               |                  |              |

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 82 OF 84

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

|   |             |                                 |                  |  |                |
|---|-------------|---------------------------------|------------------|--|----------------|
| <b>A. Full Name (Last, First, Middle Initial)</b><br><b>TDS</b> |             | <b>Transaction ID : S021815</b> |                  | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |                |
| Mailing Address PO Box 94510                                    |             |                                 |                  |  |                |
| City<br>Palatine  | State<br>IL | Zip Code<br>60094               |                  |  |                |
| Purpose of Disbursement:<br>Office Phones                       |             |                                 |                  | Allocated Activity or Event Year-To-Date<br>1300.98  |                |
| Activity or Event Identifier:                                   |             | Category/<br>Type               |                  | Date<br>MM / DD / YYYY<br>01 / 14 / 2015   |                |
| FEDERAL SHARE   |             | +                               | NONFEDERAL SHARE |  | = TOTAL AMOUNT |
| 195.15  |             |                                 | 1105.83          |  | 1300.98        |

|   |             |                                 |                  |  |                |
|---|-------------|---------------------------------|------------------|--|----------------|
| <b>B. Full Name (Last, First, Middle Initial)</b><br><b>TDS</b> |             | <b>Transaction ID : T021815</b> |                  | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |                |
| Mailing Address PO Box 94510                                    |             |                                 |                  |  |                |
| City<br>Palatine  | State<br>IL | Zip Code<br>60094               |                  |  |                |
| Purpose of Disbursement:<br>Office Phones                       |             |                                 |                  | Allocated Activity or Event Year-To-Date<br>364.59   |                |
| Activity or Event Identifier:                                   |             | Category/<br>Type               |                  | Date<br>MM / DD / YYYY<br>01 / 21 / 2015   |                |
| FEDERAL SHARE   |             | +                               | NONFEDERAL SHARE |  | = TOTAL AMOUNT |
| 54.69   |             |                                 | 309.90           |  | 364.59         |

|   |             |                                 |                  |  |                |
|---|-------------|---------------------------------|------------------|--|----------------|
| <b>C. Full Name (Last, First, Middle Initial)</b><br><b>Time Warner Cable</b> |             | <b>Transaction ID : U021815</b> |                  | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |                |
| Mailing Address PO Box 3237   |             |                                 |                  |  |                |
| City<br>Milwaukee   | State<br>WI | Zip Code<br>53203               |                  |  |                |
| Purpose of Disbursement:<br>Cable   |             |                                 |                  | Allocated Activity or Event Year-To-Date<br>1406.68  |                |
| Activity or Event Identifier:   |             | Category/<br>Type               |                  | Date<br>MM / DD / YYYY<br>01 / 14 / 2015   |                |
| FEDERAL SHARE   |             | +                               | NONFEDERAL SHARE |  | = TOTAL AMOUNT |
| 211.00  |             |                                 | 1195.68          |  | 1406.68        |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 460.84        |   | 2611.41          |   | 3072.25      |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

|               |                  |              |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
|               |                  |              |

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 83 OF 84

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

|  |             |                                 |                  |   |                |
|--|-------------|---------------------------------|------------------|---|----------------|
| <b>A. Full Name (Last, First, Middle Initial)</b><br><b>Verizon Wireless</b> |             | <b>Transaction ID : V021815</b> |                  | <b>Allocated Activity or Event:</b><br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |                |
| Mailing Address PO Box 25505   |             |                                 |                  |   |                |
| City<br>Lehigh Valley  | State<br>PA | Zip Code<br>18002               |                  |   |                |
| Purpose of Disbursement:<br>Wireless Internet                                |             |                                 |                  | Allocated Activity or Event Year-To-Date<br>31.62   |                |
| Activity or Event Identifier:  |             | Category/<br>Type               |                  | Date<br>MM / DD / YYYY<br>01 / 21 / 2015  |                |
| FEDERAL SHARE  |             | +                               | NONFEDERAL SHARE |   | = TOTAL AMOUNT |
| 4.74   |             |                                 | 26.88            |   | 31.62          |

|  |             |                                 |                  |   |                |
|--|-------------|---------------------------------|------------------|---|----------------|
| <b>B. Full Name (Last, First, Middle Initial)</b><br><b>Verizon Wireless</b> |             | <b>Transaction ID : W021815</b> |                  | <b>Allocated Activity or Event:</b><br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |                |
| Mailing Address PO Box 25505   |             |                                 |                  |   |                |
| City<br>Lehigh Valley  | State<br>PA | Zip Code<br>18002               |                  |   |                |
| Purpose of Disbursement:<br>Wireless internet                                |             |                                 |                  | Allocated Activity or Event Year-To-Date<br>330.80  |                |
| Activity or Event Identifier:  |             | Category/<br>Type               |                  | Date<br>MM / DD / YYYY<br>01 / 27 / 2015  |                |
| FEDERAL SHARE  |             | +                               | NONFEDERAL SHARE |   | = TOTAL AMOUNT |
| 49.62  |             |                                 | 281.18           |   | 330.80         |

|  |             |                                 |                  |   |                |
|--|-------------|---------------------------------|------------------|---|----------------|
| <b>C. Full Name (Last, First, Middle Initial)</b><br><b>Wausau Water Works</b> |             | <b>Transaction ID : X021815</b> |                  | <b>Allocated Activity or Event:</b><br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |                |
| Mailing Address 407 Grant Street   |             |                                 |                  |   |                |
| City<br>Wausau   | State<br>WI | Zip Code<br>54403               |                  |   |                |
| Purpose of Disbursement:<br>Utilities  |             |                                 |                  | Allocated Activity or Event Year-To-Date<br>71.37   |                |
| Activity or Event Identifier:  |             | Category/<br>Type               |                  | Date<br>MM / DD / YYYY<br>01 / 21 / 2015  |                |
| FEDERAL SHARE  |             | +                               | NONFEDERAL SHARE |   | = TOTAL AMOUNT |
| 10.71  |             |                                 | 60.66            |   | 71.37          |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 65.07         |   | 368.72           |   | 433.79       |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

|               |                  |              |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
|               |                  |              |

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 84 OF 84

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

|   |  |             |                                 |                   |  |  |  |              |
|---|--|-------------|---------------------------------|-------------------|--|--|--|--------------|
| <b>A. Full Name (Last, First, Middle Initial)</b><br><b>Wisconsin Public Service Corp</b> |  |             | <b>Transaction ID : Y021815</b> |                   |  | Allocated Activity or Event:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |              |
| Mailing Address PO Box 19003  |  |             |                                 |                   |  |  |  |              |
| City<br>Green Bay   |  | State<br>WI |                                 | Zip Code<br>54307 |  |  |  |              |
| Purpose of Disbursement:<br>Utilities   |  |             |                                 | Category/<br>Type |  | Allocated Activity or Event Year-To-Date<br>270.76   |  |              |
| Activity or Event Identifier:   |  |             |                                 |                   |  | Date <input type="text" value="01"/> / <input type="text" value="21"/> / <input type="text" value="2015"/>   |  |              |
| FEDERAL SHARE   |  | +           |                                 | NONFEDERAL SHARE  |  | =  |  | TOTAL AMOUNT |
| 40.61   |  |             |                                 | 230.15            |  |  |  | 270.76       |

|   |  |       |   |                   |  |   |  |              |
|---|--|-------|---|-------------------|--|---|--|--------------|
| <b>B. Full Name (Last, First, Middle Initial)</b> |  |       | Allocated Activity or Event:<br><input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |                   |  |   |  |              |
| Mailing Address                                   |  |       |   |                   |  |   |  |              |
| City  |  | State |   | Zip Code          |  |   |  |              |
| Purpose of Disbursement:                          |  |       |   | Category/<br>Type |  |   |  |              |
| Activity or Event Identifier:                     |  |       |   |                   |  |   |  |              |
| FEDERAL SHARE                                     |  | +     |   | NONFEDERAL SHARE  |  | = |  | TOTAL AMOUNT |
|   |  |       |   |                   |  |   |  |              |

|   |  |       |   |                   |  |   |  |              |
|---|--|-------|---|-------------------|--|---|--|--------------|
| <b>C. Full Name (Last, First, Middle Initial)</b> |  |       | Allocated Activity or Event:<br><input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |                   |  |   |  |              |
| Mailing Address                                   |  |       |   |                   |  |   |  |              |
| City  |  | State |   | Zip Code          |  |   |  |              |
| Purpose of Disbursement:                          |  |       |   | Category/<br>Type |  |   |  |              |
| Activity or Event Identifier:                     |  |       |   |                   |  |   |  |              |
| FEDERAL SHARE                                     |  | +     |   | NONFEDERAL SHARE  |  | = |  | TOTAL AMOUNT |
|   |  |       |   |                   |  |   |  |              |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 40.61         |   | 230.15           |   | 270.76       |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

|               |                  |              |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| 2614.13       | 14813.42         | 17427.53     |