

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

REPUBLICAN PARTY OF WISCONSIN

ADDRESS (number and street) 148 E. JOHNSON STREET

Check if different than previously reported. (ACC)

MADISON WI 53703

2. **FEC IDENTIFICATION NUMBER** 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 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input checked="" type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12G)	

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(d) 30-Day **Post -Election** Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 08 01 2011 through 08 31 2011

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 Bob Geason

Signature of Treasurer Electronically Filed by Bob Geason Date 09 16 2011

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											<b>FEC FORM 3X</b> (Rev. 12/2004)
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**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
REPUBLICAN PARTY OF WISCONSIN

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		271718.16
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	580843.67									
(c) Total Receipts (from Line 19) .....	114035.00	1263965.12								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	694878.67	1535683.28								
7. Total Disbursements (from Line 31) .....	128682.77	969487.38								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	566195.90	566195.90								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
REPUBLICAN PARTY OF WISCONSIN

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	1

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) .....	47446.00	322086.00
(ii) Unitemized .....	65589.00	675396.58
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	113035.00	997482.58
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	1000.00	82518.01
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	114035.00	1080000.59
12. Transfers From Affiliated/Other Party Committees .....	0.00	171969.20
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	11995.33
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	114035.00	1263965.12
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	114035.00	1263965.12

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	4945.26	21379.82
(ii) Non-Federal Share.....	28023.03	122421.89
(b) Other Federal Operating Expenditures.....	12856.25	203080.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	45824.54	346882.52
22. Transfers to Affiliated/Other Party Committees.....	0.00	110000.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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) Shared 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 .....	82858.23	512604.86
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	82858.23	512604.86
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	128682.77	969487.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	100659.74	847065.49

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	114035.00	1080000.59
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	114035.00	1080000.59
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	17801.51	224460.63
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	11995.33
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	17801.51	212465.30

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 68  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

**A.**

Full Name (Last, First, Middle Initial)  
Robert Abrams

Mailing Address 16 Hudson Street  
Apt 6D

City State Zip Code  
New York NY 10013

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

Name of Employer Information Requested Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
08 / 04 / 2011

**Transaction ID:** SA11AI.18985

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Dan T Argall

Mailing Address 2022 Night Pasture Road

City State Zip Code  
Cedarburg WI 53012-8858

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

Name of Employer Diamond Auto Inc. Occupation  
Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
08 / 19 / 2011

**Transaction ID:** SA11AI.18036

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
David Bahl

Mailing Address 2001 S Prairie Ave

City State Zip Code  
Waukesha WI 53189

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

Name of Employer Weldall Manufacturing Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
MM / DD / YYYY  
08 / 09 / 2011

**Transaction ID:** SA11AI.16505

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 68  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF WISCONSIN**

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mark Banas</p> <p>Mailing Address 2823 Aspen Road</p> <p>City State Zip Code <b>Rhinelanders WI 54501-8563</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation MMG-North Shore Physician</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">08 / 12 / 2011</span></p> <p><b>Transaction ID: SA11AI.17318</b></p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">250.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Richard S Bartosic</p> <p>Mailing Address 2235 West Jonathon Drive</p> <p>City State Zip Code <b>Appleton WI 54914-1929</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Alpha Prime Owner/manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">08 / 10 / 2011</span></p> <p><b>Transaction ID: SA11AI.17023</b></p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Bill Berrien</p> <p>Mailing Address 5569 North Lake Drive</p> <p>City State Zip Code <b>Milwaukee WI 53217-5236</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Artisan Partners Executive</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">08 / 18 / 2011</span></p> <p><b>Transaction ID: SA11AI.17832</b></p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">250.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">1000.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 68  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

**A.**

Full Name (Last, First, Middle Initial)  
Anthony Binsfield

Mailing Address 1808 Nakomis Avenue

City State Zip Code  
La Crosse WI 54603-1508

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

Name of Employer JF Brennan Co. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 05 / 2011

Transaction ID: SA11AI.16341

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)  
William Boelter

Mailing Address 31094 West Thompson Lane

City State Zip Code  
Hartland WI 53029-9705

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

Name of Employer Boelter Co. Occupation Board Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 30 / 2011

Transaction ID: SA11AI.18673

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Wendy Buccina

Mailing Address 1963 West Hidden Reserve Court

City State Zip Code  
Mequon WI 53092-5565

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

Name of Employer Homemaker Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
08 / 02 / 2011

Transaction ID: SA11AI.15686

Amount of Each Receipt this Period  
450.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1950.00

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 68

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

**A.**

Full Name (Last, First, Middle Initial)  
Roy G Butter

Mailing Address 2323 North Mayfair Road

City State Zip Code  
Milwaukee WI 53226-1506

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 03 / 2011

Transaction ID: SA11AI.15955

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
James M Cope

Mailing Address N57 W30614 Stevens Road

City State Zip Code  
Hartland WI 53029-9378

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

Name of Employer Occupation  
Grand Ridge Capital Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 09 / 2011

Transaction ID: SA11AI.16905

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Gerald E Couri

Mailing Address 1215 Seitz Drive

City State Zip Code  
Waukesha WI 53186-6745

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

Name of Employer Occupation  
Couri Ins. Agency Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 26 / 2011

Transaction ID: SA11AI.18381

Amount of Each Receipt this Period  
2500.00

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

4000.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 68  
(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

**A.** Full Name (Last, First, Middle Initial)  
Harry J Dahl

Mailing Address PO Box 788

City State Zip Code  
La Crosse WI 54602-0788

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

Name of Employer Occupation  
Dahl Ford Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 04 / 2011

**Transaction ID:** SA11AI.16195

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Russell M Darrow, Jr.

Mailing Address 4664 Cedar Park Drive

City State Zip Code  
West Bend WI 53095-9147

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

Name of Employer Occupation  
Russ Darrow Group Chairman & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 22 / 2011

**Transaction ID:** SA11AI.18219

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 8200 South 68th Street

City State Zip Code  
Franklin WI 53132-9271

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

Name of Employer Occupation  
Lannon Stone Products Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
08 / 02 / 2011

**Transaction ID:** SA11AI.15778

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1700.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 68  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

**A.**

Full Name (Last, First, Middle Initial)  
Robert C Dieck

Mailing Address 5121 Russell Court West

City Greendale State WI Zip Code 53129-2839

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

Name of Employer Superior Financial Occupation Financial Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 26 / 2011  
Transaction ID: SA11AI.18624  
Amount of Each Receipt this Period: 250.00

**B.**

Full Name (Last, First, Middle Initial)  
Steve Einhorn

Mailing Address 8205 North River Road

City Milwaukee State WI Zip Code 53217-2546

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

Name of Employer Einhorn & Assoc. Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 24 / 2011  
Transaction ID: SA11AI.18316  
Amount of Each Receipt this Period: 250.00

**C.**

Full Name (Last, First, Middle Initial)  
Thomas Ewald

Mailing Address 120 Legend Way

City Wales State WI Zip Code 53183-9539

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

Name of Employer Ewald Auto Group Occupation Auto Dealer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 16 / 2011  
Transaction ID: SA11AI.17532  
Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1000.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 68

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

**A.**

Full Name (Last, First, Middle Initial)

Jerome Friesch

Mailing Address 10605 North Hidden Creel Court

City State Zip Code  
Mequon WI 53092-8544

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

Name of Employer Occupation  
Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 225.00

Date of Receipt

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

Transaction ID: SA11AI.18839

Amount of Each Receipt this Period  
75.00

**B.**

Full Name (Last, First, Middle Initial)

Arthur W Gaulke

Mailing Address PO Box 612

City State Zip Code  
Manitowish WI 54547-0612

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

Name of Employer Occupation  
Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

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

Transaction ID: SA11AI.16679

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)

Kevin Goniu

Mailing Address 10609 North River Lake Court

City State Zip Code  
Mequon WI 53092-4865

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

Name of Employer Occupation  
St. Mary's Ozaukee Physician

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 630.00

Date of Receipt

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

Transaction ID: SA11AI.16929

Amount of Each Receipt this Period  
630.00

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

1205.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

<b>A.</b>	Full Name (Last, First, Middle Initial) Jeffrey Harris	Date of Receipt MM / DD / YYYY 08 / 05 / 2011
	Mailing Address 18235 West Burleigh Road	<b>Transaction ID:</b> SA11AI.16324
	City State Zip Code Brookfield WI 53045-2524	Amount of Each Receipt this Period 1500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self Occupation Private Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Thomas R Hefty	Date of Receipt MM / DD / YYYY 08 / 18 / 2011
	Mailing Address 14165 Saint George Court	<b>Transaction ID:</b> SA11AI.17979
	City State Zip Code Elm Grove WI 53122-2163	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Cobalt Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Robert D Hegwood	Date of Receipt MM / DD / YYYY 08 / 18 / 2011
	Mailing Address S79W36855 Wilton Road	<b>Transaction ID:</b> SA11AI.17904
	City State Zip Code Eagle WI 53119-1300	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 68
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

<b>A.</b>	Full Name (Last, First, Middle Initial) Sally Henshaw		Date of Receipt
	Mailing Address 417 Kittiver Court		<input type="text" value="08"/> / <input type="text" value="03"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Neenah	WI	54956-2913
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Information Requested		Occupation	<b>Transaction ID:</b> SA11AI.15874
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="225.00"/>	<input type="text" value="75.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Ralph Hingiss		Date of Receipt
	Mailing Address 117 North 74th Street		<input type="text" value="08"/> / <input type="text" value="16"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Milwaukee	WI	53213-3626
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Retired		Occupation	<b>Transaction ID:</b> SA11AI.17435
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Judy Hoffman		Date of Receipt
	Mailing Address 303 Skylark Way		<input type="text" value="08"/> / <input type="text" value="19"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Boulder	CO	80303-4635
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer JLH Designs		Occupation Interior Design	<b>Transaction ID:</b> SA11AI.18034
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="500.00"/>	<input type="text" value="500.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="825.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 68  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

**A.**

Full Name (Last, First, Middle Initial)  
Diane Horning

Mailing Address 7719 Greenwood Road

City State Zip Code  
Verona WI 53593-9747

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

Name of Employer Retired Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 04 / 2011

Transaction ID: SA11AI.16146

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael T Jones

Mailing Address 619 Main Street

City State Zip Code  
Delafield WI 53018-1505

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

Name of Employer Miller Coors Occupation  
VP Corporate Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 26 / 2011

Transaction ID: SA11AI.18483

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert W Jurack

Mailing Address S76W25240 Forest View Court

City State Zip Code  
Waukesha WI 53189-8305

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

Name of Employer Concept Machine Tool Occupation  
Sales Mgr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
08 / 09 / 2011

Transaction ID: SA11AI.16500

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2250.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 68  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

**A.**

Full Name (Last, First, Middle Initial)  
Kathleen A Kiernan

Mailing Address 1751 Scenic Road

City State Zip Code  
Richfield WI 53076-9604

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

Name of Employer Retired Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 332.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2011

**Transaction ID:** SA11AI.17415

Amount of Each Receipt this Period  
166.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Richard G Klein

Mailing Address 3635 Chesterwood Court

City State Zip Code  
Brookfield WI 53005-2385

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

Name of Employer Reinhart Boerner Van Dueren Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 10 / 2011

**Transaction ID:** SA11AI.17019

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
John C Koss

Mailing Address 1492 West Calumet Court

City State Zip Code  
Milwaukee WI 53217-3334

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

Name of Employer Retired Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 03 / 2011

**Transaction ID:** SA11AI.16060

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2166.00**

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 68  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

**A.**

Full Name (Last, First, Middle Initial)  
John C Koss

Mailing Address 1492 West Calumet Court

City State Zip Code  
Milwaukee WI 53217-3334

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

Name of Employer Retired Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
08 / 22 / 2011

Transaction ID: SA11AI.18122

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Joseph R Kraemer

Mailing Address W293N7383 Tamrom Lane

City State Zip Code  
Hartland WI 53029-8627

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

Name of Employer WI Metalworking Machinery Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 09 / 2011

Transaction ID: SA11AI.16632

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Kathleen Larson

Mailing Address W945 County Road NP

City State Zip Code  
Rubicon WI 53078-9752

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

Name of Employer Allied Realty Group Occupation Broker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
08 / 10 / 2011

Transaction ID: SA11AI.17025

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 68
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

<b>A.</b>	Full Name (Last, First, Middle Initial) Helen L. Loewi		Date of Receipt	
	Mailing Address 9621 N. Lake Dr.		M M / D D / Y Y Y Y 08 / 16 / 2011	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.17444
	Milwaukee	WI	53217-6101	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		1000.00	
Name of Employer Homemaker		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1000.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mark A Matthesen		Date of Receipt	
	Mailing Address 9137 West Wisconsin Avenue		M M / D D / Y Y Y Y 08 / 09 / 2011	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.16881
	Milwaukee	WI	53226-3519	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		250.00	
Name of Employer Amcore Bank		Occupation Commercial Banker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		250.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Jay F McKenna, III		Date of Receipt	
	Mailing Address		M M / D D / Y Y Y Y 08 / 09 / 2011	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.16556
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period	
			500.00	
Name of Employer Information Requested		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 19 / 68  
(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

**A.** Full Name (Last, First, Middle Initial)  
Steven W Mehmert  
 Mailing Address N35W28364 Taylors Woods Road  
 City State Zip Code  
 Pewaukee WI 53072-3343  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Mehmert Store Services Owner  
 Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
 500.00  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 8 / 1 1 / 2 0 1 1  
**Transaction ID:** SA11AI.17149  
 Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
Karen Meyer  
 Mailing Address 453 T Bird Drive  
 City State Zip Code  
 Fond Du Lac WI 54935-9723  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Agnesian Healthcare Doctor  
 Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
 500.00  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 8 / 1 2 / 2 0 1 1  
**Transaction ID:** SA11AI.17231  
 Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
Dettef B. Moore  
 Mailing Address 3704 North Lake Drive  
 City State Zip Code  
 Milwaukee WI 53211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Intl Assn for Orthodontics Association Mgmt  
 Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
 750.00  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 8 / 1 9 / 2 0 1 1  
**Transaction ID:** SA11AI.17995  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

<b>A.</b>	Full Name (Last, First, Middle Initial) Robin Moore		Date of Receipt
	Mailing Address 16175 Elder Lawn Parkway		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 09 / 2011
	City	State	Zip Code
	Delafield	WI	53018
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.16918
Name of Employer Symantec		Occupation Sales	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Mark A Nelson		Date of Receipt
	Mailing Address 14175 Golf Parkway		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 03 / 2011
	City	State	Zip Code
	Brookfield	WI	53005-7916
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.16041
Name of Employer Self		Occupation Physician	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Mark W Neumann		Date of Receipt
	Mailing Address W330 N6233 Hasslinger Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 01 / 2011
	City	State	Zip Code
	Nashotah	WI	53058-9432
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.15487
Name of Employer Neumann Enterprises		Occupation President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
		Aggregate Year-to-Date ▼	<input type="text"/> 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 21 / 68
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

<b>A.</b>	Full Name (Last, First, Middle Initial) Mark W Neumann		Date of Receipt
	Mailing Address W330 N6233 Hasslinger Drive		<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Nashotah	WI	53058-9432
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.15488
		Amount of Each Receipt this Period	<input type="text" value="500.00"/>
Name of Employer Neumann Enterprises		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1500.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Mark W Neumann		Date of Receipt
	Mailing Address W330 N6233 Hasslinger Drive		<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Nashotah	WI	53058-9432
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.15506
		Amount of Each Receipt this Period	<input type="text" value="500.00"/>
Name of Employer Neumann Enterprises		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="2000.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Jeffrey Noard		Date of Receipt
	Mailing Address N74W15970 Stonewood Dr		<input type="text" value="08"/> / <input type="text" value="09"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Menomonee Falls	WI	53051-0710
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.16628
		Amount of Each Receipt this Period	<input type="text" value="500.00"/>
Name of Employer Wells Fargo		Occupation Investments	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 22 / 68
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. James Olson		Date of Receipt
	Mailing Address 2228 North Pow Wow Trail		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 02 / 2011
	City	State	Zip Code
	Beloit	WI	53511-2039
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.15741
Name of Employer Retired		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	150.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Kathryn J Olszewski		Date of Receipt
	Mailing Address 9815 Fallen Leaf Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 03 / 2011
	City	State	Zip Code
	Middleton	WI	53562-5615
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.16080
Name of Employer Information Requested		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	500.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Jill G. Pelisek		Date of Receipt
	Mailing Address 7615 North River Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 16 / 2011
	City	State	Zip Code
	Milwaukee	WI	53217-3021
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.17519
Name of Employer UW-M		Occupation Adjunct	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 68  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

**A.**

Full Name (Last, First, Middle Initial)  
Sandra W Perpich

Mailing Address W5313 Boma Rd

City State Zip Code  
La Crosse WI 54601-2436

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

Name of Employer Occupation  
CCS Substitute Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
08 / 12 / 2011

Transaction ID: SA11AI.17305

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Patti H Pysyk

Mailing Address 165 South Sunny Slope Road

City State Zip Code  
Brookfield WI 53005-6413

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

Name of Employer Occupation  
Badger Distribution Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2011

Transaction ID: SA11AI.17660

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Jeffrey Pyzyk

Mailing Address 1240 Lake Shore Road

City State Zip Code  
Grafton WI 53024-9725

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

Name of Employer Occupation  
Appraisal Resource Group Appraiser

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
08 / 26 / 2011

Transaction ID: SA11AI.18377

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **600.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 68  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

**A.**

Full Name (Last, First, Middle Initial)  
Gary M Reynolds

Mailing Address W305N1663 Silverwood Lane

City State Zip Code  
Delafield WI 53018-2177

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

Name of Employer Occupation  
GMR Marketing CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 09 / 2011

Transaction ID: SA11AI.16914

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
Peter M Sommerhauser

Mailing Address 780 North Water Street

City State Zip Code  
Milwaukee WI 53202-3512

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

Name of Employer Occupation  
Godfrey & Kahn Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 19 / 2011

Transaction ID: SA11AI.18032

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Mathew Tharaniyl

Mailing Address 14415 West Meadowshire Drive

City State Zip Code  
New Berlin WI 53151-2478

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

Name of Employer Occupation  
Bloom Consultants President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
08 / 26 / 2011

Transaction ID: SA11AI.18601

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**

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



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

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

FOR LINE NUMBER: PAGE 25 / 68  
(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

**A.** Full Name (Last, First, Middle Initial)  
Don L Tylor

Mailing Address 27100 Shananagi Lane

City State Zip Code  
Waukesha WI 53188

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

Name of Employer Occupation  
Waukesha State Bank Banker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2011

**Transaction ID:** SA11AI.15490

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Robert E Vlach, Jr.

Mailing Address 6084 North Eagle Crest Drive

City State Zip Code  
Appleton WI 54913-8498

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

Name of Employer Occupation  
Valley Urologic Assoc. MD

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
08 / 10 / 2011

**Transaction ID:** SA11AI.16967

Amount of Each Receipt this Period  
500.00

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

Mailing Address 8301 Old Sauk Road Apt. 324

City State Zip Code  
Middleton WI 53562-4394

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 09 / 2011

**Transaction ID:** SA11AI.16522

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1500.00**

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

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

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

FOR LINE NUMBER: PAGE 26 / 68

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

**A.**

Full Name (Last, First, Middle Initial)  
Heather Ziegler

Mailing Address N65W35145 Road J

City State Zip Code  
Oconomowoc WI 53066-1811

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

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 6000.00

Date of Receipt

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

Transaction ID: SA11AI.16603

Amount of Each Receipt this Period  
6000.00

**B.**

Full Name (Last, First, Middle Initial)  
Stephen Ziegler

Mailing Address N65 W35145 Rd. J

City State Zip Code  
Oconomowoc WI 53066-1811

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

Name of Employer Occupation  
IPC, Inc. President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt

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

Transaction ID: SA11AI.18987

Amount of Each Receipt this Period  
9000.00

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

15000.00

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

47446.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 68  
(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

A.

Full Name (Last, First, Middle Initial)  
INTEGRYS ENERGY GROUP, INC PAC

Mailing Address 130 E RANDOLPH DR

City State Zip Code  
CHICAGO IL 60601

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  
M M / D D / Y Y Y Y  
08 / 12 / 2011

Transaction ID: SA11C.18980

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)								PAGE 28 / 68			
	<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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Action Lock &amp; Security</p> <p>Mailing Address     State Street</p> <p>City     State     Zip Code Madison     WI     53703</p> <p>Purpose of Disbursement 8/30 CC Pmt: Keys</p> <p>Candidate Name</p> <p>Office Sought:     <input type="checkbox"/> House                           <input type="checkbox"/> Senate                           <input type="checkbox"/> President</p> <p>State:     District:</p> <p>Disbursement For:     <input type="checkbox"/> Primary     <input type="checkbox"/> General                                  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.19118 <b>Date of Disbursement</b></p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center; border: 1px solid gray;"><span style="font-size: 24px;">8.69</span></p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Aspect Consulting, LLC</p> <p>Mailing Address     3103 Susan Court</p> <p>City     State     Zip Code Cross Plains     WI     53528</p> <p>Purpose of Disbursement Compliance consulting</p> <p>Candidate Name</p> <p>Office Sought:     <input type="checkbox"/> House                           <input type="checkbox"/> Senate                           <input type="checkbox"/> President</p> <p>State:     District:</p> <p>Disbursement For:     <input type="checkbox"/> Primary     <input type="checkbox"/> General                                  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.19092 <b>Date of Disbursement</b></p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center; border: 1px solid gray;"><span style="font-size: 24px;">2250.00</span></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Aspect Consulting, LLC</p> <p>Mailing Address     3103 Susan Court</p> <p>City     State     Zip Code Cross Plains     WI     53528</p> <p>Purpose of Disbursement Expense reimbursement</p> <p>Candidate Name</p> <p>Office Sought:     <input type="checkbox"/> House                           <input type="checkbox"/> Senate                           <input type="checkbox"/> President</p> <p>State:     District:</p> <p>Disbursement For:     <input type="checkbox"/> Primary     <input type="checkbox"/> General                                  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.19096 <b>Date of Disbursement</b></p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center; border: 1px solid gray;"><span style="font-size: 24px;">234.75</span></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<span style="font-size: 24px;"><b>2484.75</b></span>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 68

<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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Best Buy</p> <p>Mailing Address</p> <p>City Madison State WI Zip Code 53713</p> <p>Purpose of Disbursement 8/30 CC Pmt: Computer equipment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.19116</p> <p>Date of Disbursement 07 / 14 / 2011</p> <p>Amount of Each Disbursement this Period 387.22</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Communications Plus</p> <p>Mailing Address 2788 Twilight Dr</p> <p>City Sun Prairie State WI Zip Code 53590</p> <p>Purpose of Disbursement Office machine repair</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.19097</p> <p>Date of Disbursement 08 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 189.90</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Dan Morse Consulting LLC</p> <p>Mailing Address 5636 Nutone St</p> <p>City Fitchburg State WI Zip Code 53711-0000</p> <p>Purpose of Disbursement Fundraising Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.19083</p> <p>Date of Disbursement 08 / 15 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p>

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

2689.90

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 68

<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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) FEDEX</p> <p>Mailing Address P.O. Box 94515</p> <p>City Palatine State IL Zip Code 60094-4515</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.19123</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="132.99"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) FEDEX</p> <p>Mailing Address P.O. Box 94515</p> <p>City Palatine State IL Zip Code 60094-4515</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.19075</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="838.61"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Heinzen Printing Inc.</p> <p>Mailing Address P.O. Box 267</p> <p>City Marshfield State WI Zip Code 54449</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.19074</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1362.01"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="2200.62"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

A.	Full Name (Last, First, Middle Initial) Heinzen Printing Inc.	Transaction ID: SB21B.19098
	Mailing Address P.O. Box 267	Date of Disbursement 08 / 30 / 2011
	City Marshfield State WI Zip Code 54449	Amount of Each Disbursement this Period 915.74
	Purpose of Disbursement Printing	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Ian's Pizza	Transaction ID: SB21B.19114
	Mailing Address State Street	Date of Disbursement 08 / 04 / 2011
	City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period 58.64
	Purpose of Disbursement 8/30 CC Pmt: Staff lunch	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Jimmy John's	Transaction ID: SB21B.19126
	Mailing Address 527 State Street	Date of Disbursement 08 / 03 / 2011
	City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period 65.50
	Purpose of Disbursement 8/30 CC Pmt: Staff lunch	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	915.74
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 68

<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

<b>A.</b>	Full Name (Last, First, Middle Initial) M&I Bank Mailing Address 1 W Main St City Madison State WI Zip Code 53703-0000 Purpose of Disbursement Service Charge 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) ▼	<b>Transaction ID:</b> SB21B.19081 <b>Date of Disbursement</b> 08 / 10 / 2011	Amount of Each Disbursement this Period 211.36
<b>B.</b>	Full Name (Last, First, Middle Initial) M&I Bank Mailing Address 1 W Main St City Madison State WI Zip Code 53703-0000 Purpose of Disbursement Service Charge 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) ▼	<b>Transaction ID:</b> SB21B.19110 <b>Date of Disbursement</b> 08 / 10 / 2011	Amount of Each Disbursement this Period 45.00
<b>C.</b>	Full Name (Last, First, Middle Initial) M&I Bank Mailing Address 1 W Main St City Madison State WI Zip Code 53703-0000 Purpose of Disbursement Service Charge 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) ▼	<b>Transaction ID:</b> SB21B.19073 <b>Date of Disbursement</b> 08 / 12 / 2011	Amount of Each Disbursement this Period 45.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>301.36</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 33 / 68

<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

<b>A.</b>	Full Name (Last, First, Middle Initial) M&I Bank Mailing Address 1 W Main St City Madison State WI Zip Code 53703-0000 Purpose of Disbursement Service Charge 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) ▼	<b>Transaction ID:</b> SB21B.19111 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 1 1	Amount of Each Disbursement this Period 69.00
<b>B.</b>	Full Name (Last, First, Middle Initial) M&I Bank Credit Card Processing Center Mailing Address Credit Card Processing Center P.O. Box 3052 City Milwaukee State WI Zip Code 53201-3052 Purpose of Disbursement Credit card payment 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) ▼	<b>Transaction ID:</b> SB21B.19099 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 1 1	Amount of Each Disbursement this Period 478.40
<b>C.</b>	Full Name (Last, First, Middle Initial) M&I Bank Credit Card Processing Center Mailing Address Credit Card Processing Center P.O. Box 3052 City Milwaukee State WI Zip Code 53201-3052 Purpose of Disbursement Credit card payment 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) ▼	<b>Transaction ID:</b> SB21B.19100 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 1 1	Amount of Each Disbursement this Period 64.57

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<b>611.97</b>	
<b>TOTAL</b> This Period (last page this line number only) .....			

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 34 / 68

<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**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>M&amp;I Bank Credit Card Processing Center</b> <hr/> Mailing Address <b>Credit Card Processing Center</b> <b>P.O. Box 3052</b> <hr/> City <b>Milwaukee</b> State <b>WI</b> Zip Code <b>53201-3052</b> <hr/> Purpose of Disbursement <b>Credit card payment</b> Candidate Name _____ Category/Type _____ <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____	<b>Transaction ID:</b> SB21B.19101 <b>Date of Disbursement</b> <div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y  <b>0 8 / 3 0 / 2 0 1 1</b> </div> <hr/> <b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 2px; text-align: center;"> <b>346.07</b> </div>
<b>B.</b> Full Name (Last, First, Middle Initial) <b>M&amp;I Merchant Services</b> <hr/> Mailing Address <b>601 Riverside Avenue</b> <hr/> City <b>Jacksonville</b> State <b>FL</b> Zip Code <b>32204</b> <hr/> Purpose of Disbursement <b>Credit card processing fee</b> Candidate Name _____ Category/Type _____ <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____	<b>Transaction ID:</b> SB21B.19079 <b>Date of Disbursement</b> <div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y  <b>0 8 / 0 9 / 2 0 1 1</b> </div> <hr/> <b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 2px; text-align: center;"> <b>4.95</b> </div>
<b>C.</b> Full Name (Last, First, Middle Initial) <b>M&amp;I Merchant Services</b> <hr/> Mailing Address <b>601 Riverside Avenue</b> <hr/> City <b>Jacksonville</b> State <b>FL</b> Zip Code <b>32204</b> <hr/> Purpose of Disbursement <b>Credit card processing fee</b> Candidate Name _____ Category/Type _____ <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____	<b>Transaction ID:</b> SB21B.19080 <b>Date of Disbursement</b> <div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y  <b>0 8 / 1 0 / 2 0 1 1</b> </div> <hr/> <b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 2px; text-align: center;"> <b>435.62</b> </div>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>786.64</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 35 / 68

<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

<b>A.</b>	Full Name (Last, First, Middle Initial) M&I Merchant Services <hr/> Mailing Address 601 Riverside Avenue <hr/> City Jacksonville State FL Zip Code 32204 <hr/> Purpose of Disbursement Credit card processing fee Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.19082 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 2 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 4.91
<b>B.</b>	Full Name (Last, First, Middle Initial) M&I Merchant Services <hr/> Mailing Address 601 Riverside Avenue <hr/> City Jacksonville State FL Zip Code 32204 <hr/> Purpose of Disbursement Credit card processing fee Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.19104 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 24.95
<b>C.</b>	Full Name (Last, First, Middle Initial) M&I Merchant Services <hr/> Mailing Address 601 Riverside Avenue <hr/> City Jacksonville State FL Zip Code 32204 <hr/> Purpose of Disbursement Credit card processing fee Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.19109 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 86.30

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

116.16

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

<b>A.</b> Full Name (Last, First, Middle Initial) Office Max Mailing Address 2420 E Springs Dr City Madison State WI Zip Code 53704 Purpose of Disbursement 8/30 CC Pmt: Office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.19124 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 9 / 2 0 1 1
	Amount of Each Disbursement this Period 13.70 [MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>B.</b> Full Name (Last, First, Middle Initial) Pinkus McBride Mailing Address City Madison State WI Zip Code 53703 Purpose of Disbursement 8/30 CC Pmt: Meeting expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.19112 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 1 1
	Amount of Each Disbursement this Period 5.93 [MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>C.</b> Full Name (Last, First, Middle Initial) Pinnacle List Company Mailing Address 2800 Shirlington Road Suite 970 City Arlington State VA Zip Code 22206 Purpose of Disbursement List rental - not FEA Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.19102 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 1 1
	Amount of Each Disbursement this Period 1524.52
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1524.52
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 37 / 68

<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

<b>A.</b> Full Name (Last, First, Middle Initial) POSPaper.com Mailing Address City State Zip Code Purpose of Disbursement 8/30 CC Pmt: 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) ▼	Transaction ID: SB21B.19121 Date of Disbursement 07 / 19 / 2011
	Amount of Each Disbursement this Period 36.75
	[MEMO ITEM]
	Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) PostMaster Mailing Address PO Box 7005 City State Zip Code Madison WI 53707 Purpose of Disbursement 8/30 CC Pmt: Postage 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) ▼	Transaction ID: SB21B.19120 Date of Disbursement 07 / 19 / 2011
	Amount of Each Disbursement this Period 88.44
	[MEMO ITEM]
	Category/ Type

<b>C.</b> Full Name (Last, First, Middle Initial) Targeted Victory Mailing Address 66 Canal Center Plaza City State Zip Code Alexandria VA 22102 Purpose of Disbursement Online marketing 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) ▼	Transaction ID: SB21B.19103 Date of Disbursement 08 / 30 / 2011
	Amount of Each Disbursement this Period 1000.00
	[MEMO ITEM]
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	12631.66

# 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 38 / 68

<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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) American Funds Service Company</p> <p>Mailing Address PO Box 6164</p> <p>City Indianapolis State IN Zip Code 46206</p> <p>Purpose of Disbursement Employee Simple IRA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.19086</p> <p>Date of Disbursement 08 / 17 / 2011</p> <p>Amount of Each Disbursement this Period 444.62</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) American Funds Service Company</p> <p>Mailing Address PO Box 6164</p> <p>City Indianapolis State IN Zip Code 46206</p> <p>Purpose of Disbursement Employee Simple IRA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.19108</p> <p>Date of Disbursement 08 / 31 / 2011</p> <p>Amount of Each Disbursement this Period 396.33</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Assurant Employee Benefits</p> <p>Mailing Address P.O. Box 807009</p> <p>City Kansas City State MO Zip Code 64184</p> <p>Purpose of Disbursement Employee benefits service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.19095</p> <p>Date of Disbursement 08 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 213.70</p>

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

1054.65

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 39 / 68

<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

A.	Full Name (Last, First, Middle Initial) Dudley C. Bowlby	Transaction ID: SB30B.19031 Date of Disbursement																			
	Mailing Address 250 Femrite Drive	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	8		2	0	1	1												
	City Madison State WI Zip Code 53716	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Payroll	<table border="1"><tr><td>788.47</td></tr></table>	788.47																		
788.47																					
	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:																				

B.	Full Name (Last, First, Middle Initial) Dudley C. Bowlby	Transaction ID: SB30B.19061 Date of Disbursement																			
	Mailing Address 250 Femrite Drive	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	1	1												
	City Madison State WI Zip Code 53716	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Payroll	<table border="1"><tr><td>686.08</td></tr></table>	686.08																		
686.08																					
	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:																				

C.	Full Name (Last, First, Middle Initial) Ashley M Burns	Transaction ID: SB30B.19023 Date of Disbursement																			
	Mailing Address 420 W Gorham #210	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	8		2	0	1	1												
	City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Payroll	<table border="1"><tr><td>1135.34</td></tr></table>	1135.34																		
1135.34																					
	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:																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>2609.89</td></tr></table>	2609.89
2609.89		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

# 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 40 / 68

<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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ashley M Burns</p> <p>Mailing Address 420 W Gorham #210</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.19053</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="916.47"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Alexander R Combs</p> <p>Mailing Address 2734 Chamberlian Ave</p> <p>City Madison State WI Zip Code 53705</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.19032</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="667.48"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Alexander R Combs</p> <p>Mailing Address 2734 Chamberlian Ave</p> <p>City Madison State WI Zip Code 53705</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.19062</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="729.62"/></p>

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

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



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

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

FOR LINE NUMBER: (check only one)

PAGE 41 / 68

<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

A.	Full Name (Last, First, Middle Initial) Colleen Coyle	Transaction ID: SB30B.19030 Date of Disbursement 08 / 18 / 2011
	Mailing Address 3494 Sabaka Trail	Amount of Each Disbursement this Period 1188.96
	City Verona State WI Zip Code 53573	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Colleen Coyle	Transaction ID: SB30B.19060 Date of Disbursement 08 / 31 / 2011
	Mailing Address 3494 Sabaka Trail	Amount of Each Disbursement this Period 972.79
	City Verona State WI Zip Code 53573	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Benjamin Danielson	Transaction ID: SB30B.19041 Date of Disbursement 08 / 18 / 2011
	Mailing Address 230 River Lane	Amount of Each Disbursement this Period 979.54
	City Loves Park State IL Zip Code 61111	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3141.29
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 42 / 68

<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

A.

Full Name (Last, First, Middle Initial)  
Dean Care

Transaction ID: SB30B.19093  
Date of Disbursement

Mailing Address PO Box 673111

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

City State Zip Code  
Milwaukee WI 53267-3111

Amount of Each Disbursement this Period

Purpose of Disbursement  
Health insurance

4549.85
---------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Delta Dental

Transaction ID: SB30B.19094  
Date of Disbursement

Mailing Address PO Box 828

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

City State Zip Code  
Stevens Point WI 54481

Amount of Each Disbursement this Period

Purpose of Disbursement  
Dental insurance

373.78
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Department of Workforce Development Unemp

Transaction ID: SB30B.19085  
Date of Disbursement

Mailing Address Unemployment Insurance Division

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	1	1

City State Zip Code  
Madison WI 53707-7945

Amount of Each Disbursement this Period

Purpose of Disbursement  
Unemployment insurance

1835.30
---------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

6758.93
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**TOTAL** This Period (last page this line number only) ..... ►

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 43 / 68

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Thomas Dickens <hr/> Mailing Address 420 W. Gorham St <hr/> City Madison State WI Zip Code 53703-2034 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> 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) ▼	<b>Transaction ID:</b> SB30B.19024 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 1 1
	Amount of Each Disbursement this Period 2072.28
<b>B.</b> Full Name (Last, First, Middle Initial) Thomas Dickens <hr/> Mailing Address 420 W. Gorham St <hr/> City Madison State WI Zip Code 53703-2034 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> 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) ▼	<b>Transaction ID:</b> SB30B.19054 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 1 1
	Amount of Each Disbursement this Period 1443.78
<b>C.</b> Full Name (Last, First, Middle Initial) Richard A. Dickie <hr/> Mailing Address 126 N. Blair St. #1 <hr/> City Madison State WI Zip Code 53703 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> 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) ▼	<b>Transaction ID:</b> SB30B.19033 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 1 1
	Amount of Each Disbursement this Period 1247.84

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4763.90</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 44 / 68

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Richard A. Dickie <hr/> Mailing Address 126 N. Blair St. #1 <hr/> City Madison State WI Zip Code 53703 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> 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) ▼	<b>Transaction ID:</b> SB30B.19063 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 1 1
	Amount of Each Disbursement this Period 1162.41
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Elise Dietsch <hr/> Mailing Address 1100 Glenview Drive <hr/> City Baraboo State WI Zip Code 53913 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> 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) ▼	<b>Transaction ID:</b> SB30B.19022 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 1 1
	Amount of Each Disbursement this Period 1410.07
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Elise Dietsch <hr/> Mailing Address 1100 Glenview Drive <hr/> City Baraboo State WI Zip Code 53913 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> 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) ▼	<b>Transaction ID:</b> SB30B.19052 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 1 1
	Amount of Each Disbursement this Period 1213.02
	Category/ Type
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3785.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 45 / 68

<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

A.	Full Name (Last, First, Middle Initial) Donna K. Heimbach	Transaction ID: SB30B.19034 Date of Disbursement																			
	Mailing Address 3002 Dianne Drive	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	8		2	0	1	1												
	City Middleton State WI Zip Code 53562	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Payroll	<table border="1"><tr><td>803.81</td></tr></table>	803.81																		
803.81																					
	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:																				

B.	Full Name (Last, First, Middle Initial) Donna K. Heimbach	Transaction ID: SB30B.19064 Date of Disbursement																			
	Mailing Address 3002 Dianne Drive	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	1	1												
	City Middleton State WI Zip Code 53562	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Payroll	<table border="1"><tr><td>483.56</td></tr></table>	483.56																		
483.56																					
	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:																				

C.	Full Name (Last, First, Middle Initial) Bryce Hensley	Transaction ID: SB30B.19026 Date of Disbursement																			
	Mailing Address 625 N Henry St	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	8		2	0	1	1												
	City Madison State WI Zip Code 53705	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Payroll	<table border="1"><tr><td>471.06</td></tr></table>	471.06																		
471.06																					
	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:																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>1758.43</td></tr></table>	1758.43
1758.43		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**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 46 / 68

<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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bryce Hensley</p> <p>Mailing Address 625 N Henry St</p> <p>City Madison State WI Zip Code 53705</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.19056</p> <p>Date of Disbursement 08 / 31 / 2011</p> <p>Amount of Each Disbursement this Period 365.72</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Angela Hodkiewicz</p> <p>Mailing Address 4050 S 72nd Street</p> <p>City Milwaukee State WI Zip Code 53220</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.19042</p> <p>Date of Disbursement 08 / 18 / 2011</p> <p>Amount of Each Disbursement this Period 955.32</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Grayson M Hoffmann</p> <p>Mailing Address 1325 Randall Court</p> <p>City Madison State WI Zip Code 53715</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.19027</p> <p>Date of Disbursement 08 / 18 / 2011</p> <p>Amount of Each Disbursement this Period 310.13</p>

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

1631.17

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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

A.

Full Name (Last, First, Middle Initial)  
Grayson M Hoffmann

Transaction ID: SB30B.19057  
Date of Disbursement

Mailing Address 1325 Randall Court

/   /

City Madison State WI Zip Code 53715

Amount of Each Disbursement this Period

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Patrick Hogan

Transaction ID: SB30B.19043  
Date of Disbursement

Mailing Address 661 Mendota Court

/   /

City Madison State WI Zip Code 53703

Amount of Each Disbursement this Period

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Patrick Hogan

Transaction ID: SB30B.19071  
Date of Disbursement

Mailing Address 661 Mendota Court

/   /

City Madison State WI Zip Code 53703

Amount of Each Disbursement this Period

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

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

**2463.64**

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 48 / 68

<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

A.	Full Name (Last, First, Middle Initial) Hannah Huffman	Transaction ID: SB30B.19044 Date of Disbursement
	Mailing Address 3157 Muir Field Rd	<input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2011"/>
	City Madison State WI Zip Code 53719	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="1002.66"/>
	Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Brian Kind	Transaction ID: SB30B.19025 Date of Disbursement
	Mailing Address 405 Doral Court	<input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2011"/>
	City Waunakee State WI Zip Code 53597	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="761.50"/>
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Brian Kind	Transaction ID: SB30B.19055 Date of Disbursement
	Mailing Address 405 Doral Court	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City Waunakee State WI Zip Code 53597	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="761.48"/>
	Candidate Name	Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2525.64"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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

A.	Full Name (Last, First, Middle Initial) Nicole Larson	Transaction ID: SB30B.19028 Date of Disbursement 08 / 18 / 2011
	Mailing Address S57W29595 Saylesville Rd	Amount of Each Disbursement this Period 1415.96
	City Waukesha State WI Zip Code 53189	
	Purpose of Disbursement Payroll	
	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:	

B.	Full Name (Last, First, Middle Initial) Nicole Larson	Transaction ID: SB30B.19058 Date of Disbursement 08 / 31 / 2011
	Mailing Address S57W29595 Saylesville Rd	Amount of Each Disbursement this Period 1219.77
	City Waukesha State WI Zip Code 53189	
	Purpose of Disbursement Payroll	
	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:	

C.	Full Name (Last, First, Middle Initial) Larry F. Loomis	Transaction ID: SB30B.19035 Date of Disbursement 08 / 18 / 2011
	Mailing Address 762 Briar Ln	Amount of Each Disbursement this Period 741.45
	City Beloit State WI Zip Code 53511	
	Purpose of Disbursement Payroll	
	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3377.18
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 50 / 68

<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

A.	Full Name (Last, First, Middle Initial) Larry F. Loomis	Transaction ID: SB30B.19065 Date of Disbursement 08 / 31 / 2011
	Mailing Address 762 Briar Ln	
	City Beloit State WI Zip Code 53511	Amount of Each Disbursement this Period 637.50
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) David R Luhman	Transaction ID: SB30B.19036 Date of Disbursement 08 / 18 / 2011
	Mailing Address 616 Bartels St	
	City Monona State WI Zip Code 53718	Amount of Each Disbursement this Period 717.26
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) David R Luhman	Transaction ID: SB30B.19066 Date of Disbursement 08 / 31 / 2011
	Mailing Address 616 Bartels St	
	City Monona State WI Zip Code 53718	Amount of Each Disbursement this Period 766.33
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

2121.09

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 51 / 68

<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

A.	Full Name (Last, First, Middle Initial) Rachel Mattke	Transaction ID: SB30B.19045 Date of Disbursement 08 / 18 / 2011
	Mailing Address N4248 State Rd 146	Amount of Each Disbursement this Period 979.54
	City Fall River State WI Zip Code 53932	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Katherine A Mccallum	Transaction ID: SB30B.19029 Date of Disbursement 08 / 18 / 2011
	Mailing Address 1713 Park Street	Amount of Each Disbursement this Period 1818.09
	City Middleton State WI Zip Code 53562	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Katherine A Mccallum	Transaction ID: SB30B.19059 Date of Disbursement 08 / 31 / 2011
	Mailing Address 1713 Park Street	Amount of Each Disbursement this Period 1599.54
	City Middleton State WI Zip Code 53562	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	4397.17
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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

<b>A.</b> Full Name (Last, First, Middle Initial) Paychex <hr/> Mailing Address 911 Panorama Tr S <hr/> City Rochester State NY Zip Code 14625 <hr/> Purpose of Disbursement Payroll tax Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.19087 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 1 1
	Amount of Each Disbursement this Period 975.92
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Paychex <hr/> Mailing Address 911 Panorama Tr S <hr/> City Rochester State NY Zip Code 14625 <hr/> Purpose of Disbursement Payroll processing fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.19088 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 1 1
	Amount of Each Disbursement this Period 126.84
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Paychex <hr/> Mailing Address 911 Panorama Tr S <hr/> City Rochester State NY Zip Code 14625 <hr/> Purpose of Disbursement Payroll tax Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.19089 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 1 1
	Amount of Each Disbursement this Period 13613.06
	Category/ Type
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	14715.82
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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

A.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB30B.19105 Date of Disbursement
	Mailing Address 911 Panorama Tr S	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City Rochester State NY Zip Code 14625	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll tax	<input type="text" value="8214.14"/>
	Candidate Name	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB30B.19106 Date of Disbursement
	Mailing Address 911 Panorama Tr S	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City Rochester State NY Zip Code 14625	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll tax	<input type="text" value="493.07"/>
	Candidate Name	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB30B.19107 Date of Disbursement
	Mailing Address 911 Panorama Tr S	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City Rochester State NY Zip Code 14625	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll processing fee	<input type="text" value="99.29"/>
	Candidate Name	Category/ Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="8806.50"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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 54 / 68

<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

A.	Full Name (Last, First, Middle Initial) Nicholas Perrine	Transaction ID: SB30B.19046 Date of Disbursement
	Mailing Address 5518 26th Street	<input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2011"/>
	City Kenosha State WI Zip Code 53144	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="979.53"/>
	Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Nicholas Perrine	Transaction ID: SB30B.19072 Date of Disbursement
	Mailing Address 5518 26th Street	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City Kenosha State WI Zip Code 53144	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="1043.18"/>
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Scott R. Poole	Transaction ID: SB30B.19037 Date of Disbursement
	Mailing Address 1528 Sellery Street	<input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2011"/>
	City Middleton State WI Zip Code 53562	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="504.33"/>
	Candidate Name	Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2527.04"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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 55 / 68

<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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Scott R. Poole</p> <p>Mailing Address 1528 Sellery Street</p> <p>City Middleton State WI Zip Code 53562</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.19067</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="519.59"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Daniel Resch</p> <p>Mailing Address 2 Northridge Terrace Apt C</p> <p>City Madison State WI Zip Code 53704</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.19038</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="909.04"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Daniel Resch</p> <p>Mailing Address 2 Northridge Terrace Apt C</p> <p>City Madison State WI Zip Code 53704</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.19068</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="867.20"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2295.83"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 56 / 68

<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

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

A.	Full Name (Last, First, Middle Initial) Laura Roscizewski	Transaction ID: SB30B.19047 Date of Disbursement
	Mailing Address 26740 Malchine Road	<input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2011"/>
	City Waterford State WI Zip Code 53185	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="955.33"/>
	Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Sarah Thompson	Transaction ID: SB30B.19039 Date of Disbursement
	Mailing Address 409 W Gorham Street	<input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2011"/>
	City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="656.34"/>
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Sarah Thompson	Transaction ID: SB30B.19069 Date of Disbursement
	Mailing Address 409 W Gorham Street	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="626.16"/>
	Candidate Name	Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2237.83"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



# 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 57 / 68

<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

A.	Full Name (Last, First, Middle Initial) Stephan Thompson	Transaction ID: SB30B.19021 Date of Disbursement
	Mailing Address 148 E Johnson Street	<input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2011"/>
	City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="4079.05"/>
	Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Stephan Thompson	Transaction ID: SB30B.19051 Date of Disbursement
	Mailing Address 148 E Johnson Street	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="2269.03"/>
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Chris Walker	Transaction ID: SB30B.19048 Date of Disbursement
	Mailing Address W226N1509 North Ave	<input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2011"/>
	City Waukesha State WI Zip Code 53186	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="979.53"/>
	Candidate Name	Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="7327.61"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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 58 / 68

<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

A.	Full Name (Last, First, Middle Initial) Jonathan {} Wetzel Mailing Address 5038 Autumn Leaf Lane City Madison State WI Zip Code 53704 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.19050 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 1 1	Amount of Each Disbursement this Period 979.54
B.	Full Name (Last, First, Middle Initial) Joshua D. Wilson Mailing Address 641 W. Main Street City Madison State WI Zip Code 53703 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.19040 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 1 1	Amount of Each Disbursement this Period 676.94
C.	Full Name (Last, First, Middle Initial) Joshua D. Wilson Mailing Address 641 W. Main Street City Madison State WI Zip Code 53703 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.19070 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 1 1	Amount of Each Disbursement this Period 589.07

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2245.55</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<b>82858.23</b>

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

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

<b>A. Full Name (Last, First, Middle Initial)</b> West Bend Mutual			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1900 South 18th Ave			Allocated Activity or Event Year-To-Date 112130.92	
City West Bend	State WI	Zip Code 53095	Date MM / DD / YYYY 08 / 02 / 2011	
Purpose of Disbursement: Insurance			Category/Type	
Activity or Event Identifier: Administrative			Transaction ID: H4.18990	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
194.63		1102.87		1297.50

<b>B. Full Name (Last, First, Middle Initial)</b> West Bend Mutual			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1900 South 18th Ave			Allocated Activity or Event Year-To-Date 112195.92	
City West Bend	State WI	Zip Code 53095	Date MM / DD / YYYY 08 / 02 / 2011	
Purpose of Disbursement: Insurance			Category/Type	
Activity or Event Identifier: Administrative			Transaction ID: H4.18991	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.75		55.25		65.00

<b>C. Full Name (Last, First, Middle Initial)</b> The Prosper Group			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 435 East Main Street			Allocated Activity or Event Year-To-Date 112370.92	
City Greenwood	State IN	Zip Code 46143	Date MM / DD / YYYY 08 / 02 / 2011	
Purpose of Disbursement: Website			Category/Type	
Activity or Event Identifier: Administrative			Transaction ID: H4.18992	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.25		148.75		175.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
230.63		1306.87		1537.50

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

<b>A. Full Name (Last, First, Middle Initial)</b> TDS Metrocom			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 94510			Allocated Activity or Event Year-To-Date 113454.41		
City	State	Zip Code	Category/ Type		
Palatine	IL	60094-0000			
Purpose of Disbursement: Phones			Date <input type="text" value="08"/> / <input type="text" value="02"/> / <input type="text" value="2011"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.18993		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
162.52		920.97		1083.49

<b>B. Full Name (Last, First, Middle Initial)</b> Pro One Janitorial, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1101 Ashwaubenon St.			Allocated Activity or Event Year-To-Date 113954.41		
City	State	Zip Code	Category/ Type		
Green Bay	WI	54304-0000			
Purpose of Disbursement: Cleaning service			Date <input type="text" value="08"/> / <input type="text" value="02"/> / <input type="text" value="2011"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.18994		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.00		425.00		500.00

<b>C. Full Name (Last, First, Middle Initial)</b> Shadow Fax			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4601 Helfesen Dr			Allocated Activity or Event Year-To-Date 114110.56		
City	State	Zip Code	Category/ Type		
Madison	WI	53718			
Purpose of Disbursement: Ink			Date <input type="text" value="08"/> / <input type="text" value="02"/> / <input type="text" value="2011"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.18995		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.42		132.73		156.15

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
260.94		1478.70		1739.64

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

<b>A. Full Name (Last, First, Middle Initial)</b> MG&E			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 1231			Allocated Activity or Event Year-To-Date 115282.84																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table> Transaction ID: H4.18996			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	2	/	2	0	1	1
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	0	2	/	2	0	1	1																
Madison	WI	53701																							
Purpose of Disbursement: Energy bill			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
175.84		996.44		1172.28

<b>B. Full Name (Last, First, Middle Initial)</b> GE Capital			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 740441			Allocated Activity or Event Year-To-Date 116404.62																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table> Transaction ID: H4.18997			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	2	/	2	0	1	1
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	0	2	/	2	0	1	1																
Atlanta	GA	30374-0000																							
Purpose of Disbursement: Copier lease			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
168.27		953.51		1121.78

<b>C. Full Name (Last, First, Middle Initial)</b> Coca Cola Enterprises			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 2335 Paysphere Circle			Allocated Activity or Event Year-To-Date 116425.72																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table> Transaction ID: H4.18998			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	2	/	2	0	1	1
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	0	2	/	2	0	1	1																
Chicago	IL	60674-0000																							
Purpose of Disbursement: Office Soda			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.17		17.93		21.10

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
347.28		1967.88		2315.16

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

<b>A. Full Name (Last, First, Middle Initial)</b> Doc Jams LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 4611 Dovetail Dr #1			Allocated Activity or Event Year-To-Date 116616.68																						
City	State	Zip Code	Category/ Type																						
Madison	WI	53704																							
Purpose of Disbursement: Printer maintenance			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	2	/	2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	0	2	/	2	0	1	1																
Activity or Event Identifier: Administrative			Transaction ID: H4.18999																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.64		162.32		190.96

<b>B. Full Name (Last, First, Middle Initial)</b> Charter - Madison			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 2981			Allocated Activity or Event Year-To-Date 116766.81																						
City	State	Zip Code	Category/ Type																						
Milwaukee	WI	53201-2981																							
Purpose of Disbursement: Cable TV			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	2	/	2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	0	2	/	2	0	1	1																
Activity or Event Identifier: Administrative			Transaction ID: H4.19001																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.52		127.61		150.13

<b>C. Full Name (Last, First, Middle Initial)</b> Badgerland Chemical & Supply			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 620303			Allocated Activity or Event Year-To-Date 116964.61																						
City	State	Zip Code	Category/ Type																						
Middleton	WI	53562																							
Purpose of Disbursement: Janitorial supplies			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	2	/	2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	0	2	/	2	0	1	1																
Activity or Event Identifier: Administrative			Transaction ID: H4.19002																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.67		168.13		197.80

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
80.83		458.06		538.89

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

<b>A. Full Name (Last, First, Middle Initial)</b> AT&T - Long Distance			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 5017			Allocated Activity or Event Year-To-Date 122069.42		
City Carol Stream	State IL	Zip Code 60197-5017	Date <input type="text" value="08"/> / <input type="text" value="02"/> / <input type="text" value="2011"/>		
Purpose of Disbursement: Long distance			Transaction ID: H4.19003		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
765.72		4339.09		5104.81

<b>B. Full Name (Last, First, Middle Initial)</b> Capital Newspapers			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 14080			Allocated Activity or Event Year-To-Date 122353.77		
City Madison	State WI	Zip Code 53708	Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>		
Purpose of Disbursement: Advertising			Transaction ID: H4.19004		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.65		241.70		284.35

<b>C. Full Name (Last, First, Middle Initial)</b> Century Springs Bottling Co.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 275			Allocated Activity or Event Year-To-Date 122437.27		
City Genesee Depot	State WI	Zip Code 53127-0000	Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>		
Purpose of Disbursement: Bottled water			Transaction ID: H4.19005		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.53		70.97		83.50

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
820.90		4651.76		5472.66

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

<b>A. Full Name (Last, First, Middle Initial)</b> Coca Cola Enterprises			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2335 Paysphere Circle			Allocated Activity or Event Year-To-Date 122630.87		
City	State	Zip Code	Category/ Type		
Chicago	IL	60674-0000			
Purpose of Disbursement: Office soda			Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.19006		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.04		164.56		193.60

<b>B. Full Name (Last, First, Middle Initial)</b> Office Depot			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 9027			Allocated Activity or Event Year-To-Date 123850.61		
City	State	Zip Code	Category/ Type		
Des Moines	IA	50368			
Purpose of Disbursement: Office supplies			Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.19007		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
182.96		1036.78		1219.74

<b>C. Full Name (Last, First, Middle Initial)</b> The Prosper Group			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 435 East Main Street			Allocated Activity or Event Year-To-Date 123950.61		
City	State	Zip Code	Category/ Type		
Greenwood	IN	46143			
Purpose of Disbursement: Website			Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.19008		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.00		85.00		100.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
227.00		1286.34		1513.34

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



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

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

<b>A. Full Name (Last, First, Middle Initial)</b> Veolia ES Solid Waste Midwest LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 6484			Allocated Activity or Event Year-To-Date 124093.52		
City	State	Zip Code	Category/Type		
Carol Stream	IL	60197-6484			
Purpose of Disbursement: Waste management			Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.19009		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.44		121.47		142.91

<b>B. Full Name (Last, First, Middle Initial)</b> Verizon Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 25505			Allocated Activity or Event Year-To-Date 124156.89		
City	State	Zip Code	Category/Type		
Lehigh Valley	PA	18002			
Purpose of Disbursement: Wireless internet			Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.19010		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.51		53.86		63.37

<b>C. Full Name (Last, First, Middle Initial)</b> AT&T - Long Distance			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 5017			Allocated Activity or Event Year-To-Date 131147.08		
City	State	Zip Code	Category/Type		
Carol Stream	IL	60197-5017			
Purpose of Disbursement: Long distance			Date <input type="text" value="08"/> / <input type="text" value="29"/> / <input type="text" value="2011"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.19011		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1048.53		5941.66		6990.19

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1079.48		6116.99		7196.47

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

<b>A. Full Name (Last, First, Middle Initial)</b> Coca Cola Enterprises			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2335 Paysphere Circle			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">131168.18</div>	
City	State	Zip Code	Category/ Type	
Chicago	IL	60674-0000		
Purpose of Disbursement: Office soda				
Activity or Event Identifier: Administrative			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 08 / 29 / 2011 <b>Transaction ID:</b> H4.19012	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.17		17.93		21.10

<b>B. Full Name (Last, First, Middle Initial)</b> FLS Connect			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7300 Hudson Blvd #270			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">131182.76</div>	
City	State	Zip Code	Category/ Type	
St. Paul	MN	55128		
Purpose of Disbursement: Conference calls				
Activity or Event Identifier: Administrative			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 08 / 30 / 2011 <b>Transaction ID:</b> H4.19013	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.19		12.39		14.58

<b>C. Full Name (Last, First, Middle Initial)</b> Charter - Madison			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 2981			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">131331.77</div>	
City	State	Zip Code	Category/ Type	
Milwaukee	WI	53201-2981		
Purpose of Disbursement: Cable TV				
Activity or Event Identifier: Administrative			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 08 / 30 / 2011 <b>Transaction ID:</b> H4.19014	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.35		126.66		149.01

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.71		156.98		184.69

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

**A. Full Name (Last, First, Middle Initial)**  
GE Capital

Mailing Address  
PO Box 740441

City	State	Zip Code
Atlanta	GA	30374-0000

Purpose of Disbursement:  
Copier lease

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
132497.06

Date  /  /   
**Transaction ID:** H4.19015

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
174.79		990.50		1165.29

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

Mailing Address  
PO Box 1231

City	State	Zip Code
Madison	WI	53701

Purpose of Disbursement:  
Energy bill

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
133663.63

Date  /  /   
**Transaction ID:** H4.19016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
174.99		991.58		1166.57

**C. Full Name (Last, First, Middle Initial)**  
Pro One Janitorial, Inc.

Mailing Address  
1101 Ashwaubenon St.

City	State	Zip Code
Green Bay	WI	54304-0000

Purpose of Disbursement:  
Cleaning service

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
134163.63

Date  /  /   
**Transaction ID:** H4.19017

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.00		425.00		500.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
424.78		2407.08		2831.86

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

<b>A. Full Name (Last, First, Middle Initial)</b> Pitney Bowes - Postage			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 371874			Allocated Activity or Event Year-To-Date 142461.84		
City Pittsburgh	State PA	Zip Code 15250-7874	Date <input type="text" value="08"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>		
Purpose of Disbursement: Postage meter			Transaction ID: H4.19018		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1244.73		7053.48		8298.21

<b>B. Full Name (Last, First, Middle Initial)</b> Pitney Bowes - Postage			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 371874			Allocated Activity or Event Year-To-Date 142732.98		
City Pittsburgh	State PA	Zip Code 15250-7874	Date <input type="text" value="08"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>		
Purpose of Disbursement: Postage meter			Transaction ID: H4.19019		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
40.67		230.47		271.14

<b>C. Full Name (Last, First, Middle Initial)</b> TDS Metrocom			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 94510			Allocated Activity or Event Year-To-Date 143801.71		
City Palatine	State IL	Zip Code 60094-0000	Date <input type="text" value="08"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>		
Purpose of Disbursement: Phones			Transaction ID: H4.19020		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
160.31		908.42		1068.73

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1445.71		8192.37		9638.08

**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
4945.26		28023.03		32968.29