

**FEC
FORM 1****STATEMENT OF
ORGANIZATION**

(See instructions)

Office use only

1. NAME OF
COMMITTEE (in full)☐(Check if name
is changed)Example: If typing, type
over the lines

12FE4M5

Republican Party of Wisconsin

ADDRESS (number and street)

148 E. Johnson Street

☐(Check if address
is changed)

Madison

WI

53703

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

kmize@wisgop.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.wisgop.org

COMMITTEE'S FAX NUMBER

6082574141

2. DATE

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

3. FEC IDENTIFICATION NUMBER

C C00074450

4. IS THIS STATEMENT

☐

NEW (N)

OR

☒

AMENDED (A)

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

Type or Print Name of Treasurer

Cathy Stepp

Signature of Treasurer

Electronically Filed by Cathy Stepp

Date

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

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. § 437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 02/2003)

5. TYPE OF COMMITTEE (Check One)

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

Name of
CandidateCandidate
Party AffiliationOffice
Sought:

House

Senate

President

State

District

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

Name of
Candidate

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

6. Name of Any Connected Organization or Affiliated Committee

2004 Joint State Victory Committee

Mailing Address

228 S Washington St. STE 340

Alexandria

VA

22314

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Joint Cmte. Rep

Type of Connected Organization:

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

Write or Type Committee Name

Republican Party of Wisconsin

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

Full Name **Kathryn Mize**

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

Madison **WI** **53703** -

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

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

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

Full Name of Treasurer **Cathy Stepp**

Mailing Address **14520 50th Road**

Sturtevant **WI** **53177** -

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

Treasurer Telephone number **608** - **257** - **4765**

Full Name of Designated Agent **Mark Jefferson**

Mailing Address **1678 Cottonville Avenue**

Arkdale **WI** **54613** -

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

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

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

Name of Bank, Depository, etc.

	Wachovia Bank		
Mailing Address	1753 Pinnacle Dr., 3rd FL		
	McLean	VA	22102 -
	CITY ▲	STATE ▲	ZIP CODE ▲

Name of Bank, Depository, etc.

	Wachovia Bank		
Mailing Address	1753 Pinnacle Dr., 3rd FL		
	McLean	VA	22102 -
	CITY ▲	STATE ▲	ZIP CODE ▲

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

Name of Bank, Depository, etc.

[ADDITIONAL]

Mailing Address

BB&T		
1909 K St NW		
Washington	DC	20006
CITY ▲	STATE ▲	ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

Joint State Victory Committee '04

Mailing Address

228 South Washington Street

Suite 115

Alexandria

VA

22314

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Joint Fundraising Re

Type of Connected Organization:

☐

Corporation

☐

Corporation w/o Capital Stock

☐

Labor Organization

☐

Membership Organization

☐

Trade Association

☐

Cooperative

[ADDITIONAL]

ZIP CODE **A**

Telephone number _____ - _____ - _____

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

Name of Bank, Depository, etc.

[ADDITIONAL]

Mailing Address

Chain Bridge Bank

1455-A Laughlin Avenue

McLean VA 22101

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

Wisconsin Road to Victory Committee

Mailing Address

228 S Washington St STE115

Alexandria VA 22314

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship

Joint Cmt Rep

Type of Connected Organization:

☒ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization

☐ Membership Organization ☐ Trade Association ☐ Cooperative

Designated Agent

[ADDITIONAL]

Full Name

Mailing Address

Title or Position ▼

CITY A

STATE ZIP CODE **A**

Telephone number

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

Name of Bank, Depository, etc.

[ADDITIONAL]

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

McCain Victory 2008

Mailing Address

228 S. Washington Street, Ste 115

Alexandria

VA

22314

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Joint Fundraisng Rep

Type of Connected Organization:

☐

Corporation

☐

Corporation w/o Capital Stock

☐

Labor Organization

☐

Membership Organization

☐

Trade Association

☐

Cooperative

Designated Agent

[ADDITIONAL]

Full Name

Mailing Address

Title or Position ▼

CITY A

STATE ZIP CODE **A**

Telephone number
