

# 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:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 10 01 2007 through 10 31 2007

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 Cathy Stepp

Signature of Treasurer Electronically Filed by Cathy Stepp Date 01 04 2008

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									
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Republican Party of Wisconsin

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		4485.41
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	95236.44									
(c) Total Receipts (from Line 19) .....	85023.13	1033180.71								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	180259.57	1037666.12								
7. Total Disbursements (from Line 31) .....	100812.55	958219.10								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	79447.02	79447.02								
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) .....	26912.28									

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
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	27425.00	290676.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	56775.50	677783.35
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	84200.50	968459.35
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	50648.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	84200.50	1019107.35
12. Transfers From Affiliated/Other Party Committees .....	0.00	1569.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	822.63	12504.36
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)) .....	85023.13	1033180.71
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	85023.13	1033180.71

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	3048.70	29271.17
(ii) Non-Federal Share.....	7839.54	75313.81
(b) Other Federal Operating Expenditures.....	35223.35	274779.88
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	46111.59	379364.86
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent 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	7470.39
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	2500.00
(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	2500.00
29. Other Disbursements.....	0.00	1650.00
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 .....	54700.96	567233.85
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	54700.96	567233.85
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	100812.55	958219.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	92973.01	882905.29

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	84200.50	1019107.35
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	2500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	84200.50	1016607.35
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	38272.05	304051.05
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	822.63	12504.36
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	37449.42	291546.69

**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)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

**A.** Full Name (Last, First, Middle Initial)  
Alfred Anding  
Mailing Address 4921 Tonyawatha Trail  
City Monona State WI Zip Code 53716  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 10 / 10 / 2007  
Transaction ID: SA11AI.29688  
Amount of Each Receipt this Period 250.00  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
Harvey Baird  
Mailing Address 601 Spruce Drive  
City Hudson State WI Zip Code 54016  
FEC ID number of contributing federal political committee. **C**  
Name of Employer A.I.W. Occupation Anesthetist  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 10 / 30 / 2007  
Transaction ID: SA11AI.29685  
Amount of Each Receipt this Period 500.00  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
Carol Bayerlein  
Mailing Address 1810 Wedgewood Dr. East  
City Elm Grove State WI Zip Code 53122  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Franciscian Shared Lab Occupation Secretary  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 10 / 24 / 2007  
Transaction ID: SA11AI.29690  
Amount of Each Receipt this Period 100.00  
Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 850.00  
**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 7 / 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) Randall Biebel		Date of Receipt
	Mailing Address 1568 Sarah Ct.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 30 / 2007
	City	State	Zip Code
	Suamico	WI	54173
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Belson Co.		Occupation V.P.	Transaction ID: SA11AI.29676
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> .00	Amount of Each Receipt this Period <input type="text"/> 200.00
			Best efforts compliance
			<b>[MEMO ITEM]</b>

<b>B.</b>	Full Name (Last, First, Middle Initial) Dennis Christiansen		Date of Receipt
	Mailing Address 2221 E. Glendale Ave		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 02 / 2007
	City	State	Zip Code
	Milwaukee	WI	53211
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Information Requested		Occupation Information Requested	Transaction ID: SA11AI.29694
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 300.00	Amount of Each Receipt this Period <input type="text"/> 300.00
			Contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) Robert Clack		Date of Receipt
	Mailing Address 3658 Brandywood Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 10 / 2007
	City	State	Zip Code
	Sun Prairie	WI	53590
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer PR of China		Occupation Lobbyist	Transaction ID: SA11AI.29695
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 250.00	Amount of Each Receipt this Period <input type="text"/> 250.00
			Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 550.00
<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 8 / 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)  
J Coleman

Mailing Address PO Box 201 8043

City State Zip Code  
Madison WI 53708-8043

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt 09 / 04 / 2007

Transaction ID: SA11AI.29671

Amount of Each Receipt this Period 1000.00

Best efforts compliance

**[MEMO ITEM]**

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

Mailing Address 975 Pioneer Ct

City State Zip Code  
Waukesha WI 53186

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt 08 / 20 / 2007

Transaction ID: SA11AI.29674

Amount of Each Receipt this Period 500.00

Best efforts compliance

**[MEMO ITEM]**

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

Mailing Address 11445 N Solar Ave

City State Zip Code  
Mequon WI 53592

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 10 / 2007

Transaction ID: SA11AI.29696

Amount of Each Receipt this Period 1000.00

Contribution

**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 9 / 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)  
Robert Cowles

Mailing Address 2424 Ducharme Ln.

City State Zip Code  
Green Bay WI 54301

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

Name of Employer Retired      Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	0	7

**Transaction ID:** SA11AI.29697

Amount of Each Receipt this Period  
250.00

Contribution

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

Mailing Address 4949 W Brown Deer Rd

City State Zip Code  
Brown Deer WI 53223

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

Name of Employer Bank Mutual      Occupation Executive

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	8	/	2	0	0	7

**Transaction ID:** SA11AI.29679

Amount of Each Receipt this Period  
250.00

Best efforts compliance

**[MEMO ITEM]**

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

Mailing Address 17 Fuller Drive

City State Zip Code  
Madison WI 53704

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

Name of Employer Retired      Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	7

**Transaction ID:** SA11AI.29702

Amount of Each Receipt this Period  
100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **350.00**

**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)  
Christine Fleissner

Mailing Address 2878 N 73rd St

City State Zip Code  
Milwaukee WI 53210-1006

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

Name of Employer Assurant Health Occupation Accountant

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	6	/	2	0	0	7

**Transaction ID:** SA11AI.29675

Amount of Each Receipt this Period  
200.00

Best efforts compliance

**[MEMO ITEM]**

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

Mailing Address Po Box 340

City State Zip Code  
crandon WI 54520

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	7

**Transaction ID:** SA11AI.29703

Amount of Each Receipt this Period  
3500.00

Contribution

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

Mailing Address 4564 Broadway St

City State Zip Code  
Manitowoc WI 54220

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

Name of Employer Aurora Medical Group Occupation Information requested

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	7

**Transaction ID:** SA11AI.29681

Amount of Each Receipt this Period  
250.00

Best efforts compliance

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**

**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)  
Gilbert Freymiller

Mailing Address 740 Biarritz Blvd

City State Zip Code  
Platteville WI 53818

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 0 7

**Transaction ID:** SA11AI.29704

Amount of Each Receipt this Period  
100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Bruce Fritz

Mailing Address 308 W Cherry St

City State Zip Code  
Lancaster WI 53813

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

Name of Employer Tricor Insurance Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 3 0 / 2 0 0 7

**Transaction ID:** SA11AI.29680

Amount of Each Receipt this Period  
150.00

Best efforts compliance

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Carl Geraldson

Mailing Address W340 N5347 Road O

City State Zip Code  
Nashotah WI 53058

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

Name of Employer Precision Gears Occupation Sec't Treasury

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 6 / 2 0 0 7

**Transaction ID:** SA11AI.29705

Amount of Each Receipt this Period  
100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **200.00**

**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)  
Judy Gitchel

Mailing Address 867 Sheffield Ct

City Nekoosa State WI Zip Code 54457

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt: 10 / 24 / 2007

Transaction ID: SA11AI.29707

Amount of Each Receipt this Period: 150.00

Contribution

**B.**

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

Mailing Address 7616 N Links Way

City Fox Point State WI Zip Code 53217

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

Name of Employer N/A Occupation N/A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt: 09 / 18 / 2007

Transaction ID: SA11AI.29669

Amount of Each Receipt this Period: 200.00

Best efforts compliance

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
John Hanson

Mailing Address 948 Hanson Drive

City River Falls State WI Zip Code 54022

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 30 / 2007

Transaction ID: SA11AI.29709

Amount of Each Receipt this Period: 100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 250.00

**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"/> 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) Maureen Harder		Date of Receipt
	Mailing Address 441 Wildwood Rdg		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Colgate	WI	53017
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.29710
Name of Employer none		Occupation Housewife	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" value="500.00"/>
		<input type="text" value="500.00"/>	Contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert Hegwood		Date of Receipt
	Mailing Address S79 W36855 Wilton Road		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Eagle	WI	53119
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.29714
Name of Employer CCI		Occupation Owner	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" value="100.00"/>
		<input type="text" value="600.00"/>	Contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) Diane Hendricks		Date of Receipt
	Mailing Address 2501 N Parker Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Janesville	WI	53545
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.29719
Name of Employer ABC Supply Company, Inc		Occupation Owner	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" value="5000.00"/>
		<input type="text" value="5000.00"/>	Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="5600.00"/>
<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 14 / 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)  
Kenneth Hendricks

Mailing Address 2501 N. Parker Drive

City State Zip Code  
Janesville WI 53545

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

Name of Employer Occupation  
ABC Supply Co., Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
10 / 16 / 2007

**Transaction ID:** SA11AI.29720

Amount of Each Receipt this Period  
5000.00

Contribution

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

Mailing Address 3508 N Edgewood Dr

City State Zip Code  
Janesville WI 53545

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

Name of Employer Occupation  
N/A N/A

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2007

**Transaction ID:** SA11AI.29682

Amount of Each Receipt this Period  
250.00

Best efforts compliance

**[MEMO ITEM]**

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

Mailing Address 2701 Sunset Blvd #1

City State Zip Code  
Stevens Point WI 54481

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 575.00

Date of Receipt  
MM / DD / YYYY  
10 / 22 / 2007

**Transaction ID:** SA11AI.29728

Amount of Each Receipt this Period  
100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5100.00**

**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 15 / 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) Charles La Bahn		Date of Receipt
	Mailing Address PO Box 503		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Grafton	WI	53024
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.29730
Name of Employer Orion Corporation		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" value="500.00"/>
		<input type="text" value="1000.00"/>	Contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) David Ladd		Date of Receipt
	Mailing Address 1409 State Road 23		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Dodgeville	WI	53533
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.29732
Name of Employer Walnut Hollow		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" value="100.00"/>
		<input type="text" value="700.00"/>	Contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) Kenneth Luedtke		Date of Receipt
	Mailing Address 6225 Mineral Point Rd		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Madison	WI	53705
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.29735
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 ▼	<input type="text" value="1000.00"/>
		<input type="text" value="1040.00"/>	Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1600.00"/>
<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 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)  
Christopher Magiera

Mailing Address 1506 Pine View Ln

City Wausau State WI Zip Code 54403

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

Name of Employer GI Associates SC Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 03 / 2007

Transaction ID: SA11AI.29737

Amount of Each Receipt this Period 500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Michael Martin

Mailing Address W8485 Trillium Ln

City Antigo State WI Zip Code 54409

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

Name of Employer Allied Insurance Center Occupation Insurance Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt 10 / 02 / 2007

Transaction ID: SA11AI.29738

Amount of Each Receipt this Period 25.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
James McDonald

Mailing Address 8600 Corporate Dr #6

City Racine State WI Zip Code 53406

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

Name of Employer N/A Occupation retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 18 / 2007

Transaction ID: SA11AI.29739

Amount of Each Receipt this Period 200.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **725.00**

**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 17 / 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) George Moss	Date of Receipt MM / DD / YYYY 10 / 16 / 2007
	Mailing Address 9993 W North Ave #340	<b>Transaction ID:</b> SA11AI.29744
	City State Zip Code Milwaukee WI 53226	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Western State Envelope Executive	
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) J Robert Nicholson	Date of Receipt MM / DD / YYYY 10 / 30 / 2007
	Mailing Address 5626 Steeplechase Dr	<b>Transaction ID:</b> SA11AI.29746
	City State Zip Code Wauwaukee WI 53597	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Zimpro Inc Sales Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Kenneth Opitz	Date of Receipt MM / DD / YYYY 10 / 04 / 2007
	Mailing Address 4521 Fox Bluff Lane	<b>Transaction ID:</b> SA11AI.29751
	City State Zip Code Middleton WI 53562	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Opitz Realty Real Estate	
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) .....	750.00
<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 18 / 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)  
Dorothy Owen

Mailing Address 137 Canterbury Road

City Eau Claire State WI Zip Code 54701

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

Name of Employer N/A Occupation Housewife

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 04 / 2007  
**Transaction ID:** SA11AI.29752  
 Amount of Each Receipt this Period 350.00  
 Contribution

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

Mailing Address 1380 W Wisconsin Ave Apt 117

City Oconomowoc State WI Zip Code 53066

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 03 / 2007  
**Transaction ID:** SA11AI.29753  
 Amount of Each Receipt this Period 250.00  
 Contribution

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

Mailing Address W5313 Boma Road

City La Crosse State WI Zip Code 54601

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 04 / 2007  
**Transaction ID:** SA11AI.29754  
 Amount of Each Receipt this Period 100.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 700.00

**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 19 / 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) Ralph Prescott		Date of Receipt MM / DD / YYYY 06 / 28 / 2007
	Mailing Address 1889 Maple Heights Beach		Transaction ID: SA11AI.29673
	City Chilton	State WI	Zip Code 53014
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer N/A	Occupation Stay at home dad	Best efforts compliance
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

<b>B.</b>	Full Name (Last, First, Middle Initial) Maurice Reese		Date of Receipt MM / DD / YYYY 10 / 10 / 2007
	Mailing Address 713 Lakewood Boulevard		Transaction ID: SA11AI.29762
	City Madison	State WI	Zip Code 53704
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
	Name of Employer Retired	Occupation N/A	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) David Rolfs		Date of Receipt MM / DD / YYYY 09 / 06 / 2007
	Mailing Address 6565 N Green Bay Rd, Apt 104		Transaction ID: SA11AI.29678
	City Milwaukee	State WI	Zip Code 53209
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
	Name of Employer N/A	Occupation Retired	Best efforts compliance
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<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: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one) <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	PAGE 20 / 68
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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b>	Full Name (Last, First, Middle Initial) Paul Schierl		Date of Receipt MM / DD / YYYY 10 / 18 / 2007
	Mailing Address PO Box 1564		Transaction ID: SA11AI.29770
	City Green Bay	State WI	Zip Code 54305
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Self Employed	Occupation Attorney	Contribution
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) Michael Schmitz		Date of Receipt MM / DD / YYYY 09 / 17 / 2007
	Mailing Address 500 E Juniper Ct		Transaction ID: SA11AI.29672
	City Mequon	State WI	Zip Code 53092
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer N/A	Occupation Retired	Best efforts compliance
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

<b>C.</b>	Full Name (Last, First, Middle Initial) Eric Schumann		Date of Receipt MM / DD / YYYY 10 / 30 / 2007
	Mailing Address 7312 Douglas Ave Box 396		Transaction ID: SA11AI.29778
	City Racine	State WI	Zip Code 53402
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Merit Gear	Occupation Gear Maker	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 950.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	600.00
<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 21 / 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)  
John Sensenbrenner

Mailing Address 909 East Forest Avenue

City Neenah State WI Zip Code 54956

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 10 / 25 / 2007  
Transaction ID: SA11AI.29780  
Amount of Each Receipt this Period 250.00  
Contribution

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

Mailing Address 740 East Bay Pint Road

City Milwaukee State WI Zip Code 53217

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

Name of Employer Smith Investment Co Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 01 / 2007  
Transaction ID: SA11AI.29781  
Amount of Each Receipt this Period 250.00  
Contribution

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

Mailing Address PO Box 50

City Minocqua State WI Zip Code 54548

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

Name of Employer TA Solberg Company, Inc Occupation Grocer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 30 / 2007  
Transaction ID: SA11AI.29782  
Amount of Each Receipt this Period 1250.00  
Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1750.00

**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 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	

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b>	Full Name (Last, First, Middle Initial) Gilbert Stannard		Date of Receipt MM / DD / YYYY 10 / 01 / 2007
	Mailing Address PO Box 288		Transaction ID: SA11AI.29783
	City Ephraim	State WI	Zip Code 54211
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Retired	Occupation	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Richard Straus		Date of Receipt MM / DD / YYYY 10 / 24 / 2007
	Mailing Address 5653 Steeplechase Dr		Transaction ID: SA11AI.29784
	City Waunakee	State WI	Zip Code 53597
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Straus Printing Company	Occupation Printer	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) David Uihlein		Date of Receipt MM / DD / YYYY 09 / 19 / 2007
	Mailing Address 268 Green Bay Rd		Transaction ID: SA11AI.29670
	City Cedarburg	State WI	Zip Code 53012
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer None	Occupation Retired	Best efforts compliance
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	750.00
<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 23 / 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) Gordon Veldboom	Date of Receipt MM / DD / YYYY 10 / 16 / 2007
	Mailing Address 325 S. 6th Street	<b>Transaction ID:</b> SA11AI.29787
	City State Zip Code Oostburg WI 53070	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Oostburg Concrete Product Owner/Pres. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) James Wigdale	Date of Receipt MM / DD / YYYY 10 / 15 / 2007
	Mailing Address 6424 N Lake Drive	<b>Transaction ID:</b> SA11AI.29788
	City State Zip Code Milwaukee WI 53217	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Marshall & Isley Bank 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) Curt Witte	Date of Receipt MM / DD / YYYY 10 / 22 / 2007
	Mailing Address W7641 Walleye Way	<b>Transaction ID:</b> SA11AI.29789
	City State Zip Code Minong WI 54859	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation C.D.M. Tool & Manufacturing Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1400.00
<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 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) Brent Wogahn		Date of Receipt MM / DD / YYYY 04 / 27 / 2007
Mailing Address 3702 Timber Trails Ct		Transaction ID: SA11AI.29677
City Eau Claire	State WI	Zip Code 54701
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Evergreen Surgical	Occupation Surgeon	Best efforts compliance
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

**B.**

Full Name (Last, First, Middle Initial) Edward Zore		Date of Receipt MM / DD / YYYY 10 / 01 / 2007
Mailing Address 2505 W Dean Road		Transaction ID: SA11AI.29790
City River Hills	State WI	Zip Code 53217
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Northwestern Mutual Life	Occupation Sr. VP/Invest	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	27425.00



# 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)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" 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) U.S. Postal Service		Date of Receipt																					
Mailing Address P.O. Box 5066		<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>1</td><td>0</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		3	0		2	0	0	7														
City	State	Zip Code	Transaction ID: SA15.29786																				
Milwaukee	WI	53201-5066	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.	C		822.63																				
Name of Employer	Occupation		Business reply mail postage reimbursement																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼																						
	2188.52																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	822.63
<b>TOTAL</b> This Period (last page this line number only) .....	▶	822.63

# 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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Advantage</p> <p>Mailing Address 1611 N. Kent Street, STE 905</p> <p>City Arlington State VA Zip Code 22209</p> <p>Purpose of Disbursement Party building phone calls - not FEA</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.29590</p> <p>Date of Disbursement 10 / 15 / 2007</p> <p>Amount of Each Disbursement this Period 227.92</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) American Express Merchant Services</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072-3852</p> <p>Purpose of Disbursement Credit card processing fees</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.29560</p> <p>Date of Disbursement 10 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 4.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) American Express Merchant Services</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072-3852</p> <p>Purpose of Disbursement credit card processing fees</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.29564</p> <p>Date of Disbursement 10 / 12 / 2007</p> <p>Amount of Each Disbursement this Period 149.57</p>

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

**381.99**

**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 27 / 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

A.	Full Name (Last, First, Middle Initial) APC	Transaction ID: SB21B.29643 Date of Disbursement 10 / 31 / 2007
	Mailing Address 6470 East Johns Crossing Suite 100	Amount of Each Disbursement this Period 46.35
	City Duluth State GA Zip Code 30097	
	Purpose of Disbursement Conference calls	Category/ Type
	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.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB21B.29644 Date of Disbursement 10 / 31 / 2007
	Mailing Address PO Box 9001309	Amount of Each Disbursement this Period 2362.96
	City Louisville State KY Zip Code 40290-1309	
	Purpose of Disbursement Long distance phones	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Barrington Worldwide LLC	Transaction ID: SB21B.29555 Date of Disbursement 10 / 08 / 2007
	Mailing Address PO Box 19057	Amount of Each Disbursement this Period 1514.56
	City Alexandria State VA Zip Code 22320	
	Purpose of Disbursement Speaking fee and expenses	Category/ Type
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	3923.87
<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 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) Best Buy	Transaction ID: SB21B.29543 Date of Disbursement 08 / 24 / 2007
	Mailing Address 2452 E Springs Dr	Amount of Each Disbursement this Period 170.89
	City Madison State WI Zip Code 53704	
	Purpose of Disbursement Computer software	[MEMO ITEM]
	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.	Full Name (Last, First, Middle Initial) Capital Newspapers	Transaction ID: SB21B.29593 Date of Disbursement 10 / 15 / 2007
	Mailing Address PO Box 8759	Amount of Each Disbursement this Period 409.30
	City Madison State WI Zip Code 53708	
	Purpose of Disbursement Subscription	[MEMO ITEM]
	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) ▼	

C.	Full Name (Last, First, Middle Initial) FLS-DCI	Transaction ID: SB21B.29610 Date of Disbursement 10 / 26 / 2007
	Mailing Address 2401 W Behrend Drive STE 7	Amount of Each Disbursement this Period 4638.85
	City Phoenix State AZ Zip Code 85027	
	Purpose of Disbursement Telemarketing prosp calls - not FEA	[MEMO ITEM]
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	5048.15
<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 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) Great Dane Brewery</p> <p>Mailing Address 123 E Doty St</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Staff lunches</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.29650</p> <p>Date of Disbursement 09 / 14 / 2007</p> <p>Amount of Each Disbursement this Period 79.69</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Heartland Litho</p> <p>Mailing Address 2087 Atwood Avenue</p> <p>City Madison State WI Zip Code 53704</p> <p>Purpose of Disbursement Envelopes and labels</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.29594</p> <p>Date of Disbursement 10 / 15 / 2007</p> <p>Amount of Each Disbursement this Period 675.04</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Heartland Litho</p> <p>Mailing Address 2087 Atwood Avenue</p> <p>City Madison State WI Zip Code 53704</p> <p>Purpose of Disbursement Labels</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.29603</p> <p>Date of Disbursement 10 / 17 / 2007</p> <p>Amount of Each Disbursement this Period 37.13</p>

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

712.17

**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)

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

A.	Full Name (Last, First, Middle Initial) Heinzen Printing Inc.	Transaction ID: SB21B.29595 Date of Disbursement 10 / 15 / 2007
	Mailing Address P.O. Box 267	Amount of Each Disbursement this Period 821.04
	City Marshfield State WI Zip Code 54449	
	Purpose of Disbursement Printing costs - not FEA	Category/ Type
	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.	Full Name (Last, First, Middle Initial) Hilton - Alexandria	Transaction ID: SB21B.29651 Date of Disbursement 09 / 29 / 2007
	Mailing Address 5000 Seminary Road	Amount of Each Disbursement this Period 902.09
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement Staff hotel room	Category/ Type
	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) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Hyatt Hotels Indianapolis	Transaction ID: SB21B.29547 Date of Disbursement 09 / 08 / 2007
	Mailing Address 1 South Capitol Avenue	Amount of Each Disbursement this Period 673.90
	City Indianapolis State IN Zip Code 46204	
	Purpose of Disbursement Staff hotel rooms - not FEA	Category/ Type
	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) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	821.04
<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 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)  
Ian's Pizza

Mailing Address 319 North Frances St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Staff lunches  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: SB21B.29542  
Date of Disbursement

08 / 22 / 2007

Amount of Each Disbursement this Period

40.98

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
M&I Bank Credit Card Processing Center

Mailing Address PO Box 3052

City Milwaukee State WI Zip Code 53201

Purpose of Disbursement  
credit card finance charge  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: SB21B.29551  
Date of Disbursement

08 / 10 / 2007

Amount of Each Disbursement this Period

10.42

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
M&I Bank Credit Card Processing Center

Mailing Address PO Box 3052

City Milwaukee State WI Zip Code 53201

Purpose of Disbursement  
credit card finance charge  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: SB21B.29549  
Date of Disbursement

09 / 10 / 2007

Amount of Each Disbursement this Period

10.78

[MEMO ITEM]

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

0.00

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

A.	Full Name (Last, First, Middle Initial) M&I Bank Credit Card Processing Center	Transaction ID: SB21B.29550 Date of Disbursement 09 / 10 / 2007
	Mailing Address PO Box 3052	Amount of Each Disbursement this Period 25.00
	City Milwaukee State WI Zip Code 53201	
	Purpose of Disbursement Credit card late payment charge	[MEMO ITEM]
	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.	Full Name (Last, First, Middle Initial) M&I Bank Credit Card Processing Center	Transaction ID: SB21B.29540 Date of Disbursement 10 / 04 / 2007
	Mailing Address PO Box 3052	Amount of Each Disbursement this Period 1424.94
	City Milwaukee State WI Zip Code 53201	
	Purpose of Disbursement Credit card payment - see memo entries	
	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) ▼	

C.	Full Name (Last, First, Middle Initial) M&I Bank Credit Card Processing Center	Transaction ID: SB21B.29648 Date of Disbursement 10 / 31 / 2007
	Mailing Address PO Box 3052	Amount of Each Disbursement this Period 1100.99
	City Milwaukee State WI Zip Code 53201	
	Purpose of Disbursement Credit card payment - see memo entries	
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	2525.93
<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

A.	Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin	Transaction ID: SB21B.29668
	Mailing Address P.O. Box 5920	Date of Disbursement 10 / 12 / 2007
	City Madison State WI Zip Code 53705	Amount of Each Disbursement this Period 40.00
	Purpose of Disbursement Bank fees	Category/ Type
	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.	Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin	Transaction ID: SB21B.29536
	Mailing Address P.O. Box 5920	Date of Disbursement 10 / 13 / 2007
	City Madison State WI Zip Code 53705	Amount of Each Disbursement this Period 35.00
	Purpose of Disbursement Bank fees	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin	Transaction ID: SB21B.29565
	Mailing Address P.O. Box 5920	Date of Disbursement 10 / 13 / 2007
	City Madison State WI Zip Code 53705	Amount of Each Disbursement this Period 80.74
	Purpose of Disbursement Bank fees	Category/ Type
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	155.74
<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)

<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

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) M&I Bank of Southern Wisconsin	Transaction ID: SB21B.29619
	Mailing Address P.O. Box 5920	Date of Disbursement 10 / 30 / 2007
	City Madison State WI Zip Code 53705	Amount of Each Disbursement this Period 368.58
	Purpose of Disbursement Interest on LOC	Category/ Type
	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.	Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin	Transaction ID: SB21B.29655
	Mailing Address P.O. Box 5920	Date of Disbursement 10 / 31 / 2007
	City Madison State WI Zip Code 53705	Amount of Each Disbursement this Period 368.58
	Purpose of Disbursement Interest on LOC	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) M&I Merchant Services	Transaction ID: SB21B.29561
	Mailing Address P.O. Box 5920	Date of Disbursement 10 / 10 / 2007
	City Madison State WI Zip Code 53705	Amount of Each Disbursement this Period 322.18
	Purpose of Disbursement credit card processing fees	Category/ Type
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1059.34</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

<p><b>A.</b> Full Name (Last, First, Middle Initial) M&amp;I Merchant Services</p> <p>Mailing Address P.O. Box 5920</p> <p>City Madison State WI Zip Code 53705</p> <p>Purpose of Disbursement credit card processing fees</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.29665</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="12.95"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Parmentier's Ninth Street Floral</p> <p>Mailing Address 1369 9th St</p> <p>City Green Bay State WI Zip Code 54304</p> <p>Purpose of Disbursement Gift</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.29553</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="68.51"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address #774100, 4100 Solutions Center</p> <p>City Chicago State IL Zip Code 60677-4001</p> <p>Purpose of Disbursement Credit card processing fees</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.29552</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="19.95"/></p> <p><b>[MEMO ITEM]</b></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)

<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)  
Paypal, Inc.

Mailing Address #774100, 4100 Solutions Center

City Chicago State IL Zip Code 60677-4001

Purpose of Disbursement  
Credit card processing fees

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.29541  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	0	7

Amount of Each Disbursement this Period

19.95
-------

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Paypal, Inc.

Mailing Address #774100, 4100 Solutions Center

City Chicago State IL Zip Code 60677-4001

Purpose of Disbursement  
credit card processing fees

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.29649  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	0	7

Amount of Each Disbursement this Period

19.95
-------

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
PostMaster

Mailing Address PO Box 7005

City Madison State WI Zip Code 53707

Purpose of Disbursement  
Business reply mail postage

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.29596  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	0	7

Amount of Each Disbursement this Period

1000.00
---------

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

1000.00

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

A.	Full Name (Last, First, Middle Initial) Regency Florist	Transaction ID: SB21B.29653 Date of Disbursement 10 / 03 / 2007
	Mailing Address 2221 E Capitol Dr	Amount of Each Disbursement this Period 99.26
	City Milwaukee State WI Zip Code 53211	
	Purpose of Disbursement Gift	[MEMO ITEM]
	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.	Full Name (Last, First, Middle Initial) Mary Stitt	Transaction ID: SB21B.29666 Date of Disbursement 10 / 24 / 2007
	Mailing Address 1478 Noridge Trail	Amount of Each Disbursement this Period 1500.00
	City Port Washington State WI Zip Code 53074	
	Purpose of Disbursement Fundraising consulting	[MEMO ITEM]
	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) ▼

C.	Full Name (Last, First, Middle Initial) Mary Stitt	Transaction ID: SB21B.29667 Date of Disbursement 10 / 30 / 2007
	Mailing Address 1478 Noridge Trail	Amount of Each Disbursement this Period 1500.00
	City Port Washington State WI Zip Code 53074	
	Purpose of Disbursement Fundraising consulting	[MEMO ITEM]
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<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 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) TMobile	Transaction ID: SB21B.29544 Date of Disbursement 09 / 05 / 2007
	Mailing Address PO Box 37380	Amount of Each Disbursement this Period 39.96
	City Albuquerque State NM Zip Code 87176	
	Purpose of Disbursement Wireless internet	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Unisource Direct	Transaction ID: SB21B.29537 Date of Disbursement 10 / 01 / 2007
	Mailing Address 925 Harrington Drive	Amount of Each Disbursement this Period 2259.75
	City Madison State WI Zip Code 53718	
	Purpose of Disbursement Finance mailing - not FEA	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Unisource Direct	Transaction ID: SB21B.29599 Date of Disbursement 10 / 15 / 2007
	Mailing Address 925 Harrington Drive	Amount of Each Disbursement this Period 6671.92
	City Madison State WI Zip Code 53718	
	Purpose of Disbursement Finance mailing - not FEA	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	8931.67
<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 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) Unisource Direct</p> <p>Mailing Address 925 Harrington Drive</p> <p>City Madison State WI Zip Code 53718</p> <p>Purpose of Disbursement Finance mailing - not FEA</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.29606</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1863.00"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Unisource Direct</p> <p>Mailing Address 925 Harrington Drive</p> <p>City Madison State WI Zip Code 53718</p> <p>Purpose of Disbursement Postage for finance mailing - not FEA</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.29612</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3037.50"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Unisource Direct</p> <p>Mailing Address 925 Harrington Drive</p> <p>City Madison State WI Zip Code 53718</p> <p>Purpose of Disbursement Finance mailing - not FEA</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.29663</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></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)

<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)  
United Air

Mailing Address P.O. Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement  
Staff Airfare to DC

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.29546

Date of Disbursement

09 / 06 / 2007

Amount of Each Disbursement this Period

344.60

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Windway Capital Corp

Mailing Address 630 Riverfront Drive #200

City Sheboygan State WI Zip Code 53082

Purpose of Disbursement  
List development

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.29562

Date of Disbursement

10 / 12 / 2007

Amount of Each Disbursement this Period

500.00

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

500.00

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

34973.35



# 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)  
American Funds Service Company

Mailing Address PO Box 6164

City Indianapolis State IN Zip Code 46206

Purpose of Disbursement  
Employee simple IRA

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB30B.29563

Date of Disbursement

10 / 12 / 2007

Amount of Each Disbursement this Period

864.15

**B.** Full Name (Last, First, Middle Initial)  
American Funds Service Company

Mailing Address PO Box 6164

City Indianapolis State IN Zip Code 46206

Purpose of Disbursement  
Employee simple IRA

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB30B.29617

Date of Disbursement

10 / 30 / 2007

Amount of Each Disbursement this Period

819.54

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

Mailing Address 6470 East Johns Crossing Suite 100

City Duluth State GA Zip Code 30097

Purpose of Disbursement  
Conference calls

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB30B.29591

Date of Disbursement

10 / 15 / 2007

Amount of Each Disbursement this Period

30.29

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

1713.98

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Dudley Bowlby</p> <p>Mailing Address 250 Femrite Drive</p> <p>City Madison State WI Zip Code 53716</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.29578</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="779.66"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Dudley Bowlby</p> <p>Mailing Address 250 Femrite Drive</p> <p>City Madison State WI Zip Code 53716</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.29631</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="715.76"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Matthew Brabender</p> <p>Mailing Address 3914 Rieder Road #1</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.29579</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="595.78"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2091.20"/>
<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 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

A.

Full Name (Last, First, Middle Initial)  
Matthew Brabender

Transaction ID: SB30B.29632  
Date of Disbursement

Mailing Address 3914 Rieder Road #1

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	7

City State Zip Code  
Madison WI 53704

Amount of Each Disbursement this Period

Purpose of Disbursement  
Payroll

605.76
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

B.

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

Transaction ID: SB30B.29613  
Date of Disbursement

Mailing Address PO Box 88610

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	7

City State Zip Code  
Milwaukee WI 53288

Amount of Each Disbursement this Period

Purpose of Disbursement  
Health insurance

2905.17
---------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

C.

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

Transaction ID: SB30B.29614  
Date of Disbursement

Mailing Address PO Box 828

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	7

City State Zip Code  
Stevens Point WI 54481

Amount of Each Disbursement this Period

Purpose of Disbursement  
Dental insurance

470.41
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

3981.34
---------

**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)

<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) Dept. of Workforce Development	Transaction ID: SB30B.29611 Date of Disbursement 10 / 29 / 2007
	Mailing Address PO Box 78960	Amount of Each Disbursement this Period 661.42
	City Milwaukee State WI Zip Code 53278	
	Purpose of Disbursement Unemployment taxes	
	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) Richard Dickie	Transaction ID: SB30B.29580 Date of Disbursement 10 / 15 / 2007
	Mailing Address 126 North Blair Street #1	Amount of Each Disbursement this Period 1155.06
	City Madison State WI Zip Code 53703	
	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) Richard Dickie	Transaction ID: SB30B.29633 Date of Disbursement 10 / 31 / 2007
	Mailing Address 126 North Blair Street #1	Amount of Each Disbursement this Period 1140.06
	City Madison State WI Zip Code 53703	
	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) .....	▶	2956.54
<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Jason Gammeter <hr/> Mailing Address 367 East Monroe St <hr/> City Wyocena State WI Zip Code 53969 <hr/> Purpose of Disbursement Payroll 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.29581 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 7 <hr/> Amount of Each Disbursement this Period 66.01
<b>B.</b>	Full Name (Last, First, Middle Initial) Jason Gammeter <hr/> Mailing Address 367 East Monroe St <hr/> City Wyocena State WI Zip Code 53969 <hr/> Purpose of Disbursement Payroll 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.29634 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 7 <hr/> Amount of Each Disbursement this Period 18.58
<b>C.</b>	Full Name (Last, First, Middle Initial) Guardian <hr/> Mailing Address PO Box 95101 <hr/> City Chicago State IL Zip Code 60694 <hr/> Purpose of Disbursement Life insurance 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.29615 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 7 <hr/> Amount of Each Disbursement this Period 390.65

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	475.24
<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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Donna Heimbach</p> <p>Mailing Address 3002 Dianne Drive</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.29582</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="784.44"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Donna Heimbach</p> <p>Mailing Address 3002 Dianne Drive</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.29635</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="432.14"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) IRS</p> <p>Mailing Address Payment Center</p> <p>City Kansas City State MO Zip Code 64999</p> <p>Purpose of Disbursement Payroll taxes</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.29588</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5959.64"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="7176.22"/></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)

PAGE 47 / 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)  
IRS

Transaction ID: SB30B.29607  
Date of Disbursement

Mailing Address Payment Center

10 / 26 / 2007

City State Zip Code  
Kansas City MO 64999

Amount of Each Disbursement this Period

Purpose of Disbursement  
Unemployment taxes

Category/  
Type

69.45

Candidate Name

Office Sought:  House  
 Senate  
 President  
Disbursement For:  Primary  General  
 Other (specify) ▼  
State: District:

B.

Full Name (Last, First, Middle Initial)  
IRS

Transaction ID: SB30B.29608  
Date of Disbursement

Mailing Address Payment Center

10 / 26 / 2007

City State Zip Code  
Kansas City MO 64999

Amount of Each Disbursement this Period

Purpose of Disbursement  
Payroll taxes

Category/  
Type

325.21

Candidate Name

Office Sought:  House  
 Senate  
 President  
Disbursement For:  Primary  General  
 Other (specify) ▼  
State: District:

C.

Full Name (Last, First, Middle Initial)  
IRS

Transaction ID: SB30B.29641  
Date of Disbursement

Mailing Address Payment Center

10 / 31 / 2007

City State Zip Code  
Kansas City MO 64999

Amount of Each Disbursement this Period

Purpose of Disbursement  
Payroll taxes

Category/  
Type

5842.50

Candidate Name

Office Sought:  House  
 Senate  
 President  
Disbursement For:  Primary  General  
 Other (specify) ▼  
State: District:

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

6237.16

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 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) Mark Jefferson	Transaction ID: SB30B.29566 Date of Disbursement 10 / 15 / 2007
	Mailing Address 1678 Cottonville Avenue	Amount of Each Disbursement this Period 2648.59
	City Arkdale State WI Zip Code 54613	
	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) Mark Jefferson	Transaction ID: SB30B.29620 Date of Disbursement 10 / 31 / 2007
	Mailing Address 1678 Cottonville Avenue	Amount of Each Disbursement this Period 2578.56
	City Arkdale State WI Zip Code 54613	
	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) Juston Johnson	Transaction ID: SB30B.29567 Date of Disbursement 10 / 15 / 2007
	Mailing Address 820 Williamson Street	Amount of Each Disbursement this Period 1308.66
	City Madison State WI Zip Code 53703	
	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) .....	▶	6535.81
<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)  
Juston Johnson

Transaction ID: SB30B.29621  
Date of Disbursement

Mailing Address 820 Williamson Street

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	7

City Madison State WI Zip Code 53703

Amount of Each Disbursement this Period

Purpose of Disbursement  
Payroll

1310.67
---------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Kyle Johnson

Transaction ID: SB30B.29568  
Date of Disbursement

Mailing Address 210 N Charter #504

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	0	7

City Madison State WI Zip Code 53715

Amount of Each Disbursement this Period

Purpose of Disbursement  
Payroll

167.97
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Kyle Johnson

Transaction ID: SB30B.29622  
Date of Disbursement

Mailing Address 210 N Charter #504

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	7

City Madison State WI Zip Code 53715

Amount of Each Disbursement this Period

Purpose of Disbursement  
Payroll

164.50
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

1643.14
---------

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)

<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) Brian Kind</p> <p>Mailing Address 6403 Alison Ln</p> <p>City Madison State WI Zip Code 53711</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.29569</p> <p>Date of Disbursement 10 / 15 / 2007</p> <p>Amount of Each Disbursement this Period 1620.91</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Brian Kind</p> <p>Mailing Address 6403 Alison Ln</p> <p>City Madison State WI Zip Code 53711</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.29623</p> <p>Date of Disbursement 10 / 31 / 2007</p> <p>Amount of Each Disbursement this Period 1625.89</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Kirsten Kukowski</p> <p>Mailing Address 3029 Maple Valley Drive #201</p> <p>City Madison State WI Zip Code 53719</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.29570</p> <p>Date of Disbursement 10 / 15 / 2007</p> <p>Amount of Each Disbursement this Period 1153.27</p>

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

**4400.07**

**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) Kirsten Kukowski	Transaction ID: SB30B.29625 Date of Disbursement 10 / 31 / 2007
	Mailing Address 3029 Maple Valley Drive #201	Amount of Each Disbursement this Period 1203.82
	City Madison State WI Zip Code 53719	
	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) Larry Loomis	Transaction ID: SB30B.29583 Date of Disbursement 10 / 15 / 2007
	Mailing Address 3157 Muir Field Road #47	Amount of Each Disbursement this Period 497.90
	City Madison State WI Zip Code 53719	
	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 Loomis	Transaction ID: SB30B.29636 Date of Disbursement 10 / 31 / 2007
	Mailing Address 3157 Muir Field Road #47	Amount of Each Disbursement this Period 565.73
	City Madison State WI Zip Code 53719	
	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) .....	▶	2267.45
<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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Megan C Marshall</p> <p>Mailing Address 505 University Ave, Apt 504</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.29571</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="212.09"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Megan C Marshall</p> <p>Mailing Address 505 University Ave, Apt 504</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.29626</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="221.50"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Kathryn Mize</p> <p>Mailing Address 414 N Livingston Street #2</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.29572</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1734.06"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2167.65"/>
<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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Kathryn Mize</p> <p>Mailing Address 414 N Livingston Street #2</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 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.29627</p> <p>Date of Disbursement 10 / 31 / 2007</p> <p>Amount of Each Disbursement this Period 1736.05</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Sherrie Osegard</p> <p>Mailing Address 2346 Talc Trail #208</p> <p>City Madison State WI Zip Code 53719</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.29573</p> <p>Date of Disbursement 10 / 15 / 2007</p> <p>Amount of Each Disbursement this Period 970.32</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Sherrie Osegard</p> <p>Mailing Address 2346 Talc Trail #208</p> <p>City Madison State WI Zip Code 53719</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.29628</p> <p>Date of Disbursement 10 / 31 / 2007</p> <p>Amount of Each Disbursement this Period 980.61</p>

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

3686.98

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

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

Use separate schedule(s)  
for each category of the  
Detailed Summary 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) Scott Poole	Transaction ID: SB30B.29584 Date of Disbursement 10 / 15 / 2007
	Mailing Address 445 West Gilman #202	Amount of Each Disbursement this Period 302.36
	City Madison State WI Zip Code 53703	
	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) Scott Poole	Transaction ID: SB30B.29637 Date of Disbursement 10 / 31 / 2007
	Mailing Address 445 West Gilman #202	Amount of Each Disbursement this Period 356.50
	City Madison State WI Zip Code 53703	
	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) Karoline Rezin	Transaction ID: SB30B.29574 Date of Disbursement 10 / 15 / 2007
	Mailing Address 5329 Old Middleton Rd, Apt. 202	Amount of Each Disbursement this Period 1061.83
	City Madison State WI Zip Code 53705	
	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) .....	▶	1720.69
<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) Karoline Rezin	Transaction ID: SB30B.29629 Date of Disbursement 10 / 31 / 2007
	Mailing Address 5329 Old Middleton Rd, Apt. 202	Amount of Each Disbursement this Period 1101.65
	City Madison State WI Zip Code 53705	
	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 Ruzinski	Transaction ID: SB30B.29630 Date of Disbursement 10 / 31 / 2007
	Mailing Address 7230 N 107th St	Amount of Each Disbursement this Period 155.78
	City Milwaukee State WI Zip Code 53224	
	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) James Sanders	Transaction ID: SB30B.29585 Date of Disbursement 10 / 15 / 2007
	Mailing Address 4510 Texas Trail	Amount of Each Disbursement this Period 610.68
	City Madison State WI Zip Code 53704	
	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) .....	▶	1868.11
<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) James Sanders	Transaction ID: SB30B.29638 Date of Disbursement 10 / 31 / 2007
	Mailing Address 4510 Texas Trail	Amount of Each Disbursement this Period 603.49
	City Madison State WI Zip Code 53704	
	Purpose of Disbursement Payroll	Category/Type
	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.	Full Name (Last, First, Middle Initial) Charles Triller	Transaction ID: SB30B.29586 Date of Disbursement 10 / 15 / 2007
	Mailing Address 609 East Gorham St #14	Amount of Each Disbursement this Period 594.57
	City Madison State WI Zip Code 53703	
	Purpose of Disbursement Payroll	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Charles Triller	Transaction ID: SB30B.29639 Date of Disbursement 10 / 31 / 2007
	Mailing Address 609 East Gorham St #14	Amount of Each Disbursement this Period 555.23
	City Madison State WI Zip Code 53703	
	Purpose of Disbursement Payroll	Category/Type
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1753.29
<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)

<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) Joshua Wilson	Transaction ID: SB30B.29587
	Mailing Address 641 West Main Street	Date of Disbursement 10 / 15 / 2007
	City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period 648.82
	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) Joshua Wilson	Transaction ID: SB30B.29640
	Mailing Address 641 West Main Street	Date of Disbursement 10 / 31 / 2007
	City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period 638.11
	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) Wisc. Dept of Revenue	Transaction ID: SB30B.29589
	Mailing Address PO Box 93208	Date of Disbursement 10 / 15 / 2007
	City Milwaukee State WI Zip Code 53293	Amount of Each Disbursement this Period 1186.44
	Purpose of Disbursement Payroll taxes	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) .....	<b>2473.37</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 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

<b>A.</b> Full Name (Last, First, Middle Initial) Wisc. Dept of Revenue <hr/> Mailing Address PO Box 93208 <hr/> City Milwaukee State WI Zip Code 53293 <hr/> Purpose of Disbursement Payroll taxes 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.29616 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 7
	Amount of Each Disbursement this Period 343.47
<b>B.</b> Full Name (Last, First, Middle Initial) Wisc. Dept of Revenue <hr/> Mailing Address PO Box 93208 <hr/> City Milwaukee State WI Zip Code 53293 <hr/> Purpose of Disbursement Payroll taxes 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.29642 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 7
	Amount of Each Disbursement this Period 1152.11

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

1495.58

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

54643.82

**SCHEDULE C (FEC Form 3X)**

**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 59 / 68 FOR LINE 13 OF FORM 3X
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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

**Transaction ID: SC/10.6376**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address P.O. Box 5920	
City Madison State WI ZIP Code 53705	

Original Amount of Loan 110000.00	Cumulative Payment To Date 106787.72	Balance Outstanding at Close of This Period 3212.28
--------------------------------------	---	--

**TERMS**

Date Incurred MM DD YY 01 09 2002	Date Due 04/30/08	Interest Rate 8.25 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	----------------------	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional) .....	<input style="width: 100%;" type="text" value="3212.28"/>
<b>TOTALS</b> This Period (last page in this line only) .....	<input style="width: 100%;" type="text" value=".00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)**

**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 60 / 68 FOR LINE 13 OF FORM 3X
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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

**Transaction ID: SC/10.10726**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address P.O. Box 5920	
City Madison State WI ZIP Code 53705	

Original Amount of Loan 34000.00	Cumulative Payment To Date 10300.00	Balance Outstanding at Close of This Period 23700.00
-------------------------------------	--	---

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:		
M M 1 2	D D 3 1	Y Y Y Y 2 0 0 3	4/30/08	8.25 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional) .....	<input style="width: 100%;" type="text" value="23700.00"/>
<b>TOTALS</b> This Period (last page in this line only) .....	<input style="width: 100%;" type="text" value="26912.28"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**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> Gordon Flesch Company			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 992			Allocated Activity or Event Year-To-Date 93927.94		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Madison	WI	53701	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Copier toner			Transaction ID: H4.29538		
Activity or Event Identifier: Administrative			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Date <input type="text"/> / <input type="text"/> / <input type="text"/>			Transaction ID: H4.29538		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
64.74		166.46		231.20

<b>B. Full Name (Last, First, Middle Initial)</b> JaMark & Associates 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 722			Allocated Activity or Event Year-To-Date 95716.17		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Cedarburg	WI	53012	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Zip code software			Transaction ID: H4.29539		
Activity or Event Identifier: Administrative			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Date <input type="text"/> / <input type="text"/> / <input type="text"/>			Transaction ID: H4.29539		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
500.70		1287.53		1788.23

<b>C. Full Name (Last, First, Middle Initial)</b> Grant Greenfield			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 2910 Hoard Street #4			Allocated Activity or Event Year-To-Date 96454.67		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Madison	WI	53704	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Tree removal			Transaction ID: H4.29557		
Activity or Event Identifier: Administrative			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Date <input type="text"/> / <input type="text"/> / <input type="text"/>			Transaction ID: H4.29557		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
206.78		531.72		738.50

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
772.22		1985.71		2757.93

**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> GFC Leasing			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 1129			Allocated Activity or Event Year-To-Date 97012.72	
City Madison	State WI	Zip Code 53701	Date <input type="text" value="10"/> / <input type="text" value="08"/> / <input type="text" value="2007"/>	
Purpose of Disbursement: Copier lease			Transaction ID: H4.29559	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
156.25		401.80		558.05

<b>B. 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 97289.42	
City Middleton	State WI	Zip Code 53562	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>	
Purpose of Disbursement: Janitorial supplies			Transaction ID: H4.29592	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
77.48		199.22		276.70

<b>C. 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 1486 Kenwood Center			Allocated Activity or Event Year-To-Date 97789.42	
City Menasha	State WI	Zip Code 54952	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>	
Purpose of Disbursement: Cleaning service			Transaction ID: H4.29597	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
140.00		360.00		500.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
373.73		961.02		1334.75

**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> Token Storage			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 131			Allocated Activity or Event Year-To-Date 98299.42	
City DeForest	State WI	Zip Code 53532	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>	
Purpose of Disbursement: Storage			Transaction ID: H4.29598	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
142.80		367.20		510.00

<b>B. Full Name (Last, First, Middle Initial)</b> Waste Management			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 9001505			Allocated Activity or Event Year-To-Date 98334.42	
City Louisville	State KY	Zip Code 40290	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>	
Purpose of Disbursement: Waste removal			Transaction ID: H4.29600	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.80		25.20		35.00

<b>C. Full Name (Last, First, Middle Initial)</b> West Bend Mutual Insurance			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 99391.17	
City West Bend	State WI	Zip Code 53095	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>	
Purpose of Disbursement: Building insurance			Transaction ID: H4.29601	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
295.89		760.86		1056.75

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
448.49		1153.26		1601.75

**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 1010			Allocated Activity or Event Year-To-Date 100213.38		
City Monroe	State WI	Zip Code 53566	Date <input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Phone service			Transaction ID: H4.29604		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
230.22		591.99		822.21

<b>B. Full Name (Last, First, Middle Initial)</b> TDS Telecom			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 608			Allocated Activity or Event Year-To-Date 100329.43		
City Lancaster	State WI	Zip Code 53813-0608	Date <input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Phone system repairs			Transaction ID: H4.29605		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.49		83.56		116.05

<b>C. Full Name (Last, First, Middle Initial)</b> Charter Communications			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 135 South LaSalle Street Dept 8123			Allocated Activity or Event Year-To-Date 100394.77		
City Chicago	State IL	Zip Code 60674	Date <input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Cable tv			Transaction ID: H4.29645		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.30		47.04		65.34

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
281.01		722.59		1003.60

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



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

NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

**A. Full Name (Last, First, Middle Initial)**  
Choles Floral  
**Mailing Address**  
1135 Regent Street  
**City State Zip Code**  
Madison WI 53715  
**Purpose of Disbursement:**  
Gift  
**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**  
100467.96  
**Date** 10 / 31 / 2007  
**Transaction ID:** H4.29646

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.49		52.70		73.19

**B. Full Name (Last, First, Middle Initial)**  
Great Glacier of Wisconsin  
**Mailing Address**  
PO Box 249  
**City State Zip Code**  
Lake Delton WI 53940  
**Purpose of Disbursement:**  
Bottled water  
**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**  
100504.90  
**Date** 10 / 31 / 2007  
**Transaction ID:** H4.29647

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.34		26.60		36.94

**C. 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**  
101327.53  
**Date** 10 / 31 / 2007  
**Transaction ID:** H4.29657

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
230.34		592.29		822.63

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
261.17		671.59		932.76

**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> 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 <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">101402.45</div>	
City Des Moines	State IA	Zip Code 50368	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 31 / 2007</div>	
Purpose of Disbursement: Office supplies				
Activity or Event Identifier: Administrative			Transaction ID: H4.29658	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.98		53.94		74.92

<b>B. Full Name (Last, First, Middle Initial)</b> Office Max			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 2420 East Springs Dr			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">101950.61</div>	
City Madison	State WI	Zip Code 53701	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 31 / 2007</div>	
Purpose of Disbursement: Office supplies				
Activity or Event Identifier: Administrative			Transaction ID: H4.29659	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
153.48		394.68		548.16

<b>C. Full Name (Last, First, Middle Initial)</b> Purchase Power			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 856042			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">103950.61</div>	
City Louisville	State KY	Zip Code 40285	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 31 / 2007</div>	
Purpose of Disbursement: Postage for postal meter				
Activity or Event Identifier: Administrative			Transaction ID: H4.29660	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
560.00		1440.00		2000.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
734.46		1888.62		2623.08

**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> 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 1486 Kenwood Center			Allocated Activity or Event Year-To-Date 104450.61	
City Menasha	State WI	Zip Code 54952	Date MM / DD / YYYY 10 / 31 / 2007	
Purpose of Disbursement: Cleaning service			Category/ Type	
Activity or Event Identifier: Administrative			Transaction ID: H4.29661	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
140.00		360.00		500.00

<b>B. Full Name (Last, First, Middle Initial)</b> Wisconsin State Elections Board			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 2973			Allocated Activity or Event Year-To-Date 104584.98	
City Madison	State WI	Zip Code 53701	Date MM / DD / YYYY 10 / 31 / 2007	
Purpose of Disbursement: Photocopy fees			Category/ Type	
Activity or Event Identifier: Administrative			Transaction ID: H4.29664	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.62		96.75		134.37

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
177.62		456.75		634.37

**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
3048.70		7839.54		10888.24

Image# 28990013869

Form/Schedule: **SC/10** On 12/30/02, we made a \$25,000 draw on our line of credit. It is shown as an accrual under the loan payments.  
Transaction ID: **SC/10.6376** FEC Tech Support has advised this procedure to show a draw on the line of credit

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