

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

REPUBLICAN PARTY OF WISCONSIN

ADDRESS (number and street)

148 E. JOHNSON STREET

☐ Check if different than previously reported. (ACC)

MADISON

WI

53703

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00074450

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☒ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
09 01 2011

through

M M M / D D D / Y Y Y Y Y Y  
09 30 2011

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

Type or Print Name of Treasurer Bob Geason

Signature of Treasurer

Bob Geason

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
11 23 2011

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

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

REPUBLICAN PARTY OF WISCONSIN

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
09 / 01 / 2011 To: M M / D D / Y Y Y Y Y Y  
09 / 30 / 2011

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2011</span>		<span style="border: 1px solid black; padding: 2px;">271718.16</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">567553.26</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">125152.56</span>	<span style="border: 1px solid black; padding: 2px;">1389117.68</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">692705.82</span>	<span style="border: 1px solid black; padding: 2px;">1660835.84</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">116978.95</span>	<span style="border: 1px solid black; padding: 2px;">1085108.97</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">575726.87</span>	<span style="border: 1px solid black; padding: 2px;">575726.87</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



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

## For further information contact:

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

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

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

REPUBLICAN PARTY OF WISCONSIN

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 09 / 01 / 2011

To:

 M M / D D / Y Y Y Y Y  
 09 / 30 / 2011
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

46720.00

368806.00

(ii) Unitemized .....

76343.75

751740.33

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

123063.75

1120546.33

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

82518.01

(d) Total Contributions (add Lines

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

Totals to Line 33, page 5) .....

123063.75

1203064.34

## 12. Transfers From Affiliated/Other

Party Committees.....

452.45

172421.65

## 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).....

1636.36

13631.69

## 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 Transfers (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))..... ▶

125152.56

1389117.68

## 20. Total Federal Receipts

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

125152.56

1389117.68

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	10539.25	63304.28
(ii) Non-Federal Share.....	18736.40	112540.82
(b) Other Federal Operating Expenditures .....	32207.31	231163.02
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	61482.96	407008.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	110000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	55495.99	568100.85
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	55495.99	568100.85
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	116978.95	1085108.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	98242.55	972568.15

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	123063.75	1203064.34
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	123063.75	1203064.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	42746.56	294467.30
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1636.36	13631.69
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	41110.20	280835.61

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 61

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Raymond E Anderson**

Mailing Address 6221 South Racine Circle

City State Zip Code  
Englewood CO 80111-6427

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Seagr Engineering

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 30 / 2011

Transaction ID : SA11AI.23305

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Guy M Bowers**

Mailing Address PO Box 8090

City State Zip Code  
Ruidoso NM 88355-8090

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

09 / 27 / 2011

Transaction ID : SA11AI.22034

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Glenn W. Buzzard**

Mailing Address 8563 N Point Dr

City State Zip Code  
Milwaukee WI 53217-2353

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

09 / 01 / 2011

Transaction ID : SA11AI.19183

Amount of Each Receipt this Period

50.00

N/a

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

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

2050.00

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

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

FOR LINE NUMBER: PAGE 7 OF 61  
(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**

Full Name (Last, First, Middle Initial)

**A. Gerardo Caballero**

Mailing Address 4380 Loughlin Court North

City State Zip Code  
 Brookfield WI 53005-1550

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Southeast Surgical

Occupation

Doctor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.19894

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. William Conner**

Mailing Address W4138 Birch Road

City State Zip Code  
 Fond Du Lac WI 54937-7984

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 Y Y  
 09 / 28 / 2011

Transaction ID : SA11AI.22674

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. W E Crane**

Mailing Address 910 Moss Way

City State Zip Code  
 Valdosta GA 31602-4204

FEC ID number of contributing  
federal political committee.

C

Name of Employer

South GA Pecan Co

Occupation

Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2011

Transaction ID : SA11AI.22235

Amount of Each Receipt this Period

250.00

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

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

1000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 61

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Robert E Dunlap**

Mailing Address 847 Fairview Drive

City

Hartford

State

WI

Zip Code

53027-2317

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 Y Y  
09 / 28 / 2011

**Transaction ID : SA11AI.22723**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. David Dupler**

Mailing Address 9 Woodbury Court

City

Appleton

State

WI

Zip Code

54913-7111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FOX VALLEY SURGICAL ASSOC

Occupation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2011

**Transaction ID : SA11AI.23148**

Amount of Each Receipt this Period

2200.00

Full Name (Last, First, Middle Initial)

**c. Joseph S Ellis**

Mailing Address 3205 N. Marietta Avenue

City

Milwaukee

State

WI

Zip Code

53211

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

M M / D D / Y Y Y Y Y Y  
09 / 26 / 2011

**Transaction ID : SA11AI.21538**

Amount of Each Receipt this Period

250.00

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

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

2700.00



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 61

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

## **A. Louis Gentine**

Mailing Address PO Box 747

City

Elkhart Lake

State

WI

Zip Code

53020-0747

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sargento Cheese Co

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 14 / 2011

Transaction ID : SA11AI.20497

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. Barbara Grove**

Mailing Address 16855 Lake Road #B

City

Brookfield

State

WI

Zip Code

53005-5744

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Elmbrook School District

Occupation

Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 26 / 2011

Transaction ID : SA11AI.21878

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. William Hargarten Jr.**

Mailing Address 1525 Weber Court

City

Hartland

State

WI

Zip Code

53029-9339

FEC ID number of contributing  
federal political committee.

C

Name of Employer

North American Cluth

Occupation

Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 26 / 2011

Transaction ID : SA11AI.21523

Amount of Each Receipt this Period

500.00

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 10 OF 61

(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**

Full Name (Last, First, Middle Initial)

**A. Daniel I Hartung**

Mailing Address 708 Heartland Trail, Suite 200

City State Zip Code  
 Madison WI 53717-2172

FEC ID number of contributing federal political committee.

C

Name of Employer

Hartung Brothers Inc

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

635.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 09 28 2011

Transaction ID : SA11AI.22703

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Nancy Haselhorst**

Mailing Address 6225 Mineral Point Rd

City State Zip Code  
 Madison WI 53705

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 09 12 2011

Transaction ID : SA11AI.20093

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Thomas J Hauske Sr.**

Mailing Address 4845 Mueller Lane

City State Zip Code  
 West Bend WI 53095-9263

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 09 30 2011

Transaction ID : SA11AI.23380

Amount of Each Receipt this Period

500.00

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

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

1100.00

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

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

FOR LINE NUMBER: PAGE 11 OF 61  
(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**

Full Name (Last, First, Middle Initial)

**A. Judy Hoffman**

Mailing Address 303 Skylark Way

City State Zip Code  
 Boulder CO 80303-4635

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JLH Designs

Occupation

Interior Design

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 07 / 2011

**Transaction ID : SA11AI.19720**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Judy Hoffman**

Mailing Address 303 Skylark Way

City State Zip Code  
 Boulder CO 80303-4635

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JLH Designs

Occupation

Interior Design

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2011

**Transaction ID : SA11AI.22409**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Thomas R Irwin**

Mailing Address 1321 Boulder Point Drive

City State Zip Code  
 Hudson WI 54016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Delta Airlines

Occupation

Pilot

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11AI.23280**

Amount of Each Receipt this Period

250.00

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

1250.00

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

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

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

FOR LINE NUMBER: PAGE 12 OF 61

(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**

Full Name (Last, First, Middle Initial)

**A. Newell D Jasperson**

Mailing Address 6134 Highway 173 West

City State Zip Code  
 Wisconsin Rapids WI 54495-9332

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.19872

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Lolita M Kachel**

Mailing Address 513 West Center Street

City State Zip Code  
 Whitewater WI 53190-1805

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

DLK Enterprises

Property Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2011

Transaction ID : SA11AI.21008

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. Stephen B King**

Mailing Address 3508 North Edgewood Drive

City State Zip Code  
 Janesville WI 53545-9547

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

King Capital, LLC

Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 19 / 2011

Transaction ID : SA11AI.20863

Amount of Each Receipt this Period

5000.00

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

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

5400.00

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

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

FOR LINE NUMBER: PAGE 13 OF 61

(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**

Full Name (Last, First, Middle Initial)

**A. John C Koss**

Mailing Address 1492 West Calumet Court

City State Zip Code  
 Milwaukee WI 53217-3334

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2011

Transaction ID : SA11AI.22664

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Kathleen A. Krueger**

Mailing Address 1615 Lindsay Way

City State Zip Code  
 Waukesha WI 53186-0303

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Aurora

Registered Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2011

Transaction ID : SA11AI.20000

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

**C. Richard A Mann**

Mailing Address PO Box 48

City State Zip Code  
 Elkhorn WI 53121-0048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2011

Transaction ID : SA11AI.21957

Amount of Each Receipt this Period

250.00

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

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

1320.00

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

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

FOR LINE NUMBER: PAGE 14 OF 61  
(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**

Full Name (Last, First, Middle Initial)

**A. Daniel Jack McKeithan Jr**

Mailing Address 777 East Wisconsin Aveune, Suite 3

City State Zip Code  
Milwaukee WI 53202-5302

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tamarack Petroleum Company

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 26 / 2011

Transaction ID : SA11AI.21851

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Debra M Michiels**

Mailing Address 111 East Kimball

City State Zip Code  
Appleton WI 54911-5752

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Michiels Fox Banquets

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 29 / 2011

Transaction ID : SA11AI.22943

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Mark W Neumann**

Mailing Address W330 N6233 Hasslinger Drive

City State Zip Code  
Nashotah WI 53058-9432

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Neumann Enterprises

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 06 / 2011

Transaction ID : SA11AI.19561

Amount of Each Receipt this Period

100.00

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

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

2700.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 61

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Mr. San W Orr Jr.**

Mailing Address PO Box 65

City

Wausau

State

WI

Zip Code

54402-0065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Forewood, Inc.

Occupation

Attorney/CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

09 / 29 / 2011

**Transaction ID : SA11AI.22775**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Forest County Potawatomi Community**

Mailing Address PO Box 340

City

Crandon

State

WI

Zip Code

54520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

09 / 27 / 2011

**Transaction ID : SA11AI.23538**

Amount of Each Receipt this Period

7500.00

Full Name (Last, First, Middle Initial)

**C. J S Sensenbrenner Jr**

Mailing Address PO Box 67

City

Neenah

State

WI

Zip Code

54957-0067

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

09 / 27 / 2011

**Transaction ID : SA11AI.22397**

Amount of Each Receipt this Period

1000.00

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

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

13500.00

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

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

FOR LINE NUMBER: PAGE 16 OF 61  
(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**

Full Name (Last, First, Middle Initial)

**A. Barbara Smith**

Mailing Address 3222 E Hampshire Ave

City State Zip Code  
 Milwaukee WI 53211-3118

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 ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 30 2011

Transaction ID : SA11AI.23500

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. John H Sonnentag**

Mailing Address PO Box 435

City State Zip Code  
 Astatula FL 34705-0435

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

M M / D D / Y Y Y Y Y  
 09 30 2011

Transaction ID : SA11AI.23392

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Melissa L Tanke**

Mailing Address 1237 Quail Ridge Drive

City State Zip Code  
 Oneida WI 54155-8654

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 23 2011

Transaction ID : SA11AI.21275

Amount of Each Receipt this Period

500.00

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

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

2000.00



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 17 OF 61

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Kenneth E Tieman**

Mailing Address N5180 Bagley Road

City

Marinette

State

WI

Zip Code

54143-9108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2011

**Transaction ID : SA11AI.22278**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Wayne A Toenjes**

Mailing Address 1104 Flints Road

City

Wausau

State

WI

Zip Code

54401-9049

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Major Industries

Occupation

Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2011

**Transaction ID : SA11AI.23165**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. David Uihlein Jr**

Mailing Address 8265 North River Road

City

Milwaukee

State

WI

Zip Code

53217-2546

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Uihlein/Wilson Architects

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 26 / 2011

**Transaction ID : SA11AI.21395**

Amount of Each Receipt this Period

7500.00

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

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

8300.00

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

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

FOR LINE NUMBER: PAGE 18 OF 61

(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**

Full Name (Last, First, Middle Initial)

**A. Donald Utschig**

Mailing Address 3040 West Wisconsin Avenue

City

Appleton

State

WI

Zip Code

54914-1707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2011

Transaction ID : SA11AI.23187

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. John A Wagner**

Mailing Address 7344 West Heron Pond Drive

City

Thiensville

State

WI

Zip Code

53092-1961

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 28 / 2011

Transaction ID : SA11AI.22732

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Harry L Wallace**

Mailing Address 2204 West Charter Mall

City

Mequon

State

WI

Zip Code

53092-5451

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 26 / 2011

Transaction ID : SA11AI.21404

Amount of Each Receipt this Period

600.00

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

2600.00

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 OF 61

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Bruce E Wencel**

Mailing Address 5129 Whitcomb Drive

City

Madison

State

WI

Zip Code

53711-2636

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 28 / 2011

Transaction ID : SA11AI.22687

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. Patrick White**

Mailing Address 247 Legend Heights

City

Wales

State

WI

Zip Code

53183-9535

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Rapco Inc.

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 23 / 2011

Transaction ID : SA11AI.21273

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Diane Zore**

Mailing Address 2505 West Dean Road

City

Milwaukee

State

WI

Zip Code

53217-2010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 28 / 2011

Transaction ID : SA11AI.22445

Amount of Each Receipt this Period

500.00

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

800.00

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

46720.00

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

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

FOR LINE NUMBER: PAGE 20 OF 61  
(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**

Full Name (Last, First, Middle Initial)

**A. Johnson Victory Committee**

Mailing Address Po Box 365

City State Zip Code  
McLean VA 22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 27 2011

Transaction ID : SA12.23534

Amount of Each Receipt this Period

452.45

Transfer from Joint Fundraiser

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

452.45

452.45

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 21 OF 61

<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

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

## **A. USPS**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

652.92

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2011

**Transaction ID : SA15.23519**

Amount of Each Receipt this Period

652.92

Postage Reimbursement

Full Name (Last, First, Middle Initial)

## **B. USPS**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1636.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2011

**Transaction ID : SA15.23520**

Amount of Each Receipt this Period

983.44

Postage Reimbursement

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1636.36

1636.36

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

PAGE 22 OF 61

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

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Adobe Systems, Inc**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2011

Mailing Address 2750 Barrett Lakes Blvd

City	State	Zip Code
Kennesaw	GA	30144

**Transaction ID : SB21B.23664**Purpose of Disbursement  
9/30 Credit Card Pmt: Software

Amount of Each Disbursement this Period

Candidate Name

Category/ Type
-------------------

743.72

**[MEMO ITEM]**

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

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. Amazon.com**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2011

Mailing Address 1200 12th Ave. S

City	State	Zip Code
Seattle	WA	98144

**Transaction ID : SB21B.23668**Purpose of Disbursement  
9/30 Credit Card Pmt: Office Supplies

Amount of Each Disbursement this Period

Candidate Name

Category/ Type
-------------------

22.26

**[MEMO ITEM]**

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

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C. American Express Merchant Services**

Date of Disbursement

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

Mailing Address PO Box 53852

City	State	Zip Code
Phoenix	AZ	85072-3852

**Transaction ID : SB21B.23531**Purpose of Disbursement  
Credit Card Fees

Amount of Each Disbursement this Period

Candidate Name

Category/ Type
-------------------

4.95

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

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

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

4.95

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

PAGE 23 OF 61

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 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**

Full Name (Last, First, Middle Initial)

**A. American Express Merchant Services**

Mailing Address PO Box 53852

City Phoenix      State AZ      Zip Code 85072-3852

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 09 / 2011
**Transaction ID : SB21B.23546**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Aspect Consulting**

Mailing Address 3103 Susan Court

City Cross Plains      State WI      Zip Code 53528

Purpose of Disbursement  
Compliance Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2011
**Transaction ID : SB21B.23590**

Amount of Each Disbursement this Period

2527.35

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address 1030 Delta Boulevard

City Atlanta      State GA      Zip Code 30354

Purpose of Disbursement  
9/30 Credit Card Pmt: Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 09 / 2011
**Transaction ID : SB21B.23660**

Amount of Each Disbursement this Period

881.60

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

2547.35

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

PAGE 24 OF 61

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

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Deluxe Business Checks**

Mailing Address PO Box 1186

City	State	Zip Code
Lancaster	CA	93534

Purpose of Disbursement  
Office Supplies

Candidate Name

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

State: District:

Disbursement For:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2011

**Transaction ID : SB21B.23589**

Amount of Each Disbursement this Period

204.49
--------

Full Name (Last, First, Middle Initial)

**B. Domain Hosting Services**

Mailing Address 900 W Grove Pkwy

City	State	Zip Code
Tempe	AZ	85283

Purpose of Disbursement  
9/30 Credit Card Payment: Website Hosting

Candidate Name

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

State: District:

Disbursement For:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

**Transaction ID : SB21B.23647**

Amount of Each Disbursement this Period

79.99
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. FTD.com**

Mailing Address 3113 Woodcreek Drive

City	State	Zip Code
Downers Grove	IL	60515

Purpose of Disbursement  
9/30 Credit Card Pmt: Flowers

Candidate Name

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

State: District:

Disbursement For:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2011

**Transaction ID : SB21B.23655**

Amount of Each Disbursement this Period

90.98
-------

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

204.49
--------

--



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

REPUBLICAN PARTY OF WISCONSIN

210.62

[MEMO ITEM]

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

[MEMO ITEM]

248.98

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

PAGE 26 OF 61

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 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**

Full Name (Last, First, Middle Initial)

**A. iContact Corporation**

Mailing Address 5221 Paramount Pkwy

City Morrisville      State NC      Zip Code 27560

Purpose of Disbursement  
9/30 Credit Card Payment: Website Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2011
**Transaction ID : SB21B.23648**

Amount of Each Disbursement this Period

303.20

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. M&I Bank**

Mailing Address 1 W Main St

City Madison      State WI      Zip Code 53703-0000

Purpose of Disbursement  
Service Charge

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 10 / 2011
**Transaction ID : SB21B.23547**

Amount of Each Disbursement this Period

214.73

Full Name (Last, First, Middle Initial)

**C. M&I Bank**

Mailing Address 1 W Main St

City Madison      State WI      Zip Code 53703-0000

Purpose of Disbursement  
Service Charge

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2011
**Transaction ID : SB21B.23642**

Amount of Each Disbursement this Period

45.00

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

259.73

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

REPUBLICAN PARTY OF WISCONSIN

### A. M&I Bank

Category/  
Type

90.00

State:  District:

**B. M&I Bank Credit Card Processing Center**

Category/  
Type

State:  District:

**C. M&I Bank Credit Card Processing Center**

Category/  
Type

State:  District:

2950.04

4006.02

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

PAGE 28 OF 61

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 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**

Full Name (Last, First, Middle Initial)

**A. M&I Bank Credit Card Processing Center**

Date of Disbursement

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

Mailing Address Credit Card Processing Center  
P.O. Box 3052

City Milwaukee State WI Zip Code 53201-3052

Purpose of Disbursement  
Credit Card Payment

Candidate Name

Category/  
Type**Transaction ID : SB21B.23608**

Amount of Each Disbursement this Period

593.81

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. M&I Merchant Services**

Date of Disbursement

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

Mailing Address 601 Riverside Avenue

City Jacksonville State FL Zip Code 32204

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.23545**

Amount of Each Disbursement this Period

695.82

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Oshkosh House of Flowers**

Date of Disbursement

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

Mailing Address 1920 Algoma Blvd

City Oshkosh State WI Zip Code 54901

Purpose of Disbursement  
9/30 Credit Card Pmt: Flowers

Candidate Name

Category/  
Type**Transaction ID : SB21B.23649**

Amount of Each Disbursement this Period

112.25

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

1289.63

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

PAGE 29 OF 61

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 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**

Full Name (Last, First, Middle Initial)

**A. Piryx**

Mailing Address 85 Natoma Street

City San Francisco      State CA      Zip Code 94105

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2011
**Transaction ID : SB21B.23637**

Amount of Each Disbursement this Period

67.62

Full Name (Last, First, Middle Initial)

**B. REPUBLICAN PARTY OF MINNESOTA**Mailing Address 525 PARK STREET  
SUITE 250

City ST PAUL      State MN      Zip Code 55103

Purpose of Disbursement  
9/30 Credit Card Pmt: Event

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 15 / 2011
**Transaction ID : SB21B.23666**

Amount of Each Disbursement this Period

200.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. RIBBLE RESPONSIBLE GOVERNMENT COMMITTEE**

Mailing Address PO BOX 30844

City BETHESDA      State MD      Zip Code 20824

Purpose of Disbursement  
JFA Processing Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2011
**Transaction ID : SB21B.23643**

Amount of Each Disbursement this Period

890.79

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

958.41

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

PAGE 30 OF 61

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

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Rossman & Co**

Mailing Address PO Box 29917

City	State	Zip Code
Columbus	OH	43229

Purpose of Disbursement  
Phone Bill

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

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

**Transaction ID : SB21B.23638**

Amount of Each Disbursement this Period

1704.32
---------

Full Name (Last, First, Middle Initial)

**B. Southwest Publishing & Mailing Corp**

Mailing Address 2600NW Topeka Blvd

City	State	Zip Code
Topeka	KS	66617

Purpose of Disbursement  
Direct Mail Postage

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

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

**Transaction ID : SB21B.23544**

Amount of Each Disbursement this Period

5877.57
---------

Full Name (Last, First, Middle Initial)

**C. Steve Brown Direct Mail**

Mailing Address 10045 Whitetail Lane

City	State	Zip Code
Truckee	CA	96161

Purpose of Disbursement  
Direct Mail

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

**Transaction ID : SB21B.23600**

Amount of Each Disbursement this Period

14585.86
----------

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

22167.75
----------

--

# **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 31 OF 61

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 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**

Full Name (Last, First, Middle Initial)

## **A. Targeted Victory**

Mailing Address 66 Canal Center Plaza

City Alexandria State VA Zip Code 22102

Purpose of Disbursement  
Online Marketing

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 16 / 2011

**Transaction ID : SB21B.23580**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. The Great Dane Pub**

Mailing Address 123 E Doty St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
9/30 Credit Card Pmt: Food

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 06 / 2011

**Transaction ID : SB21B.23659**

Amount of Each Disbursement this Period

109.71

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **C. Tickets Now**

Mailing Address 265 Exchange Drive

City Crystal Lake State IL Zip Code 60014

Purpose of Disbursement  
9/30 Credit Card Pmt: Company Outing

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2011

**Transaction ID : SB21B.23651**

Amount of Each Disbursement this Period

245.95

**[MEMO ITEM]**

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

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

500.00

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

PAGE 32 OF 61

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

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Walgreens**

Mailing Address 15 Main Street

City	State	Zip Code
Madison	WI	53703

Purpose of Disbursement  
9/30 Credit Card Pmt: Printing

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2011

**Transaction ID : SB21B.23653**

Amount of Each Disbursement this Period

58.67
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Wisc. Dept of Revenue - Sls Tax**

Mailing Address PO Box 93389

City	State	Zip Code
Milwaukee	WI	53293

Purpose of Disbursement  
9/30 Credit Card Pmt: Processing Fee

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2011

**Transaction ID : SB21B.23657**

Amount of Each Disbursement this Period

34.44
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Wisc. Dept of Revenue - Sls Tax**

Mailing Address PO Box 93389

City	State	Zip Code
Milwaukee	WI	53293

Purpose of Disbursement  
9/30 Credit Card Pmt: WI Sales Tax

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2011

**Transaction ID : SB21B.23658**

Amount of Each Disbursement this Period

1377.44
---------

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

0.00
------

32187.31
----------



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

PAGE 33 OF 61

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

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. American Funds Service Company**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2011

Mailing Address PO Box 6164

City	State	Zip Code
Indianapolis	IN	46206

**Transaction ID : SB30B.23588**Purpose of Disbursement  
Employee Benefits

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

334.99

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

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. American Funds Service Company**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Mailing Address PO Box 6164

City	State	Zip Code
Indianapolis	IN	46206

**Transaction ID : SB30B.23636**Purpose of Disbursement  
Employee Benefits

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

290.46

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

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C. Assurant Employee Benefits**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2011

Mailing Address P.O. Box 807009

City	State	Zip Code
Kansas City	MO	64184

**Transaction ID : SB30B.23593**Purpose of Disbursement  
Employee Benefits

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

197.81

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

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

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

823.26

**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 34 OF 61

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 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**

Full Name (Last, First, Middle Initial)

## **A. Phil Bartel**

Mailing Address 20725 Vincent Court

City State Zip Code  
 Brookfield WI 53045

Purpose of Disbursement  
 Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SB30B.23616**

Amount of Each Disbursement this Period

246.33

Full Name (Last, First, Middle Initial)

## **B. Dudley Bowlby**

Mailing Address 250 Femrite Drive

City State Zip Code  
 Madison WI 53716

Purpose of Disbursement  
 Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2011

**Transaction ID : SB30B.23563**

Amount of Each Disbursement this Period

616.73

Full Name (Last, First, Middle Initial)

## **C. Dudley Bowlby**

Mailing Address 250 Femrite Drive

City State Zip Code  
 Madison WI 53716

Purpose of Disbursement  
 Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SB30B.23623**

Amount of Each Disbursement this Period

591.82

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

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

1454.88

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

PAGE 35 OF 61

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

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Ashley M Burns**

Mailing Address 420 W Gorham #210

City Madison	State WI	Zip Code 53703
-----------------	-------------	-------------------

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

**Transaction ID : SB30B.23612**

Amount of Each Disbursement this Period

916.47
--------

Full Name (Last, First, Middle Initial)

**B. Ashley M Burns**

Mailing Address 420 W Gorham #210

City Madison	State WI	Zip Code 53703
-----------------	-------------	-------------------

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2011

**Transaction ID : SB30B.23552**

Amount of Each Disbursement this Period

916.46
--------

Full Name (Last, First, Middle Initial)

**C. Alexander R. Combs**

Mailing Address 2734 Chamberlain Ave

City Madison	State WI	Zip Code 53705
-----------------	-------------	-------------------

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2011

**Transaction ID : SB30B.23564**

Amount of Each Disbursement this Period

556.17
--------

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

2389.10
---------

--

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

PAGE 36 OF 61

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

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Alexander R. Combs**

Mailing Address 2734 Chamberlain Ave

City	State	Zip Code
Madison	WI	53705

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

**Transaction ID : SB30B.23624**

Amount of Each Disbursement this Period

621.31
--------

Full Name (Last, First, Middle Initial)

**B. Colleen Coyle**

Mailing Address 3494 Sabaka Trail

City	State	Zip Code
Verona	WI	53573

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2011

**Transaction ID : SB30B.23562**

Amount of Each Disbursement this Period

972.78
--------

Full Name (Last, First, Middle Initial)

**C. Colleen Coyle**

Mailing Address 3494 Sabaka Trail

City	State	Zip Code
Verona	WI	53573

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

**Transaction ID : SB30B.23622**

Amount of Each Disbursement this Period

972.79
--------

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

2566.88

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

REPUBLICAN PARTY OF WISCONSIN

Three digital displays showing the date 09/29/2011 in MM/DD/YYYY format. The first display shows '09' with 'M' labels above the digits. The second display shows '29' with 'D' labels above the digits. The third display shows '2011' with 'Y' labels above each digit. The displays are separated by slashes.

4062.11

Three digital displays showing the date 09/15/2011 in MM/DD/YYYY format. The first display shows '09' with 'M' labels above. The second shows '15' with 'D' labels above. The third shows '2011' with 'Y' labels above. Each display has a small square indicator above the first digit.

Grade	Average Hours per Week
1	~100
2	~150
3	~200
4	~250
5	~300
6	~350
7	~400
8	~450
9	~500
10	~550
11	~600
12	1443.78

A digital display with a black border and a white background, showing the number 5842.18 in black text. The display has a series of small, dark, rectangular segments along the top and bottom edges, resembling a segmented display or a series of small windows.

A diagram of a rectangular frame structure. It consists of two horizontal bars at the top and bottom, and 12 vertical bars connecting them. The vertical bars are evenly spaced along the length of the frame.

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

PAGE 38 OF 61

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

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Thomas Dickens**

Mailing Address 420 W. Gorham St

City Madison	State WI	Zip Code 53703-2034
-----------------	-------------	------------------------

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

**Transaction ID : SB30B.23613**

Amount of Each Disbursement this Period

1524.77
---------

Full Name (Last, First, Middle Initial)

**B. Richard Dickie**

Mailing Address 126 North Blair Street #1

City Madison	State WI	Zip Code 53703
-----------------	-------------	-------------------

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2011

**Transaction ID : SB30B.23565**

Amount of Each Disbursement this Period

1197.90
---------

Full Name (Last, First, Middle Initial)

**C. Richard Dickie**

Mailing Address 126 North Blair Street #1

City Madison	State WI	Zip Code 53703
-----------------	-------------	-------------------

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

**Transaction ID : SB30B.23625**

Amount of Each Disbursement this Period

1149.74
---------

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

3872.41
---------

--

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

PAGE 39 OF 61

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

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Elise Dietsch**

Mailing Address 1100 Glenview Drive

City	State	Zip Code
Baraboo	WI	53913

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2011

**Transaction ID : SB30B.23551**

Amount of Each Disbursement this Period

1213.00
---------

Full Name (Last, First, Middle Initial)

**B. Elise Dietsch**

Mailing Address 1100 Glenview Drive

City	State	Zip Code
Baraboo	WI	53913

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

**Transaction ID : SB30B.23611**

Amount of Each Disbursement this Period

1213.01
---------

Full Name (Last, First, Middle Initial)

**C. Grace W Eberhart**

Mailing Address 3588 W Hrawatha

City	State	Zip Code
Okemos	MI	48864

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2011

**Transaction ID : SB30B.23559**

Amount of Each Disbursement this Period

124.53
--------

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

2550.54
---------

--

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

PAGE 40 OF 61

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

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Grace W Eberhart**

Mailing Address 3588 W Hrawatha

City	State	Zip Code
Okemos	MI	48864

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

**Transaction ID : SB30B.23620**

Amount of Each Disbursement this Period

162.29
--------

Full Name (Last, First, Middle Initial)

**B. Donna Heimbach**

Mailing Address 3002 Dianne Drive

City	State	Zip Code
Middleton	WI	53562

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2011

**Transaction ID : SB30B.23566**

Amount of Each Disbursement this Period

350.14
--------

Full Name (Last, First, Middle Initial)

**C. Bryce Hensley**

Mailing Address 625 N Henry St

City	State	Zip Code
Madison	WI	53705

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2011

**Transaction ID : SB30B.23556**

Amount of Each Disbursement this Period

136.96
--------

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

649.39
--------

--



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

PAGE 41 OF 61

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

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Brian Kind**

Mailing Address 405 Doral Court

City	State	Zip Code
Waunakee	WI	53597

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2011

**Transaction ID : SB30B.23555**

Amount of Each Disbursement this Period

761.48
--------

Full Name (Last, First, Middle Initial)

**B. Brian Kind**

Mailing Address 405 Doral Court

City	State	Zip Code
Waunakee	WI	53597

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

**Transaction ID : SB30B.23615**

Amount of Each Disbursement this Period

761.48
--------

Full Name (Last, First, Middle Initial)

**C. Ethan Komoroske**

Mailing Address 920 Athens Drive

City	State	Zip Code
Green Bay	WI	54311

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2011

**Transaction ID : SB30B.23560**

Amount of Each Disbursement this Period

207.82
--------

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

1730.78
---------

--

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

PAGE 42 OF 61

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

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Ethan Komoroske**

Mailing Address 920 Athens Drive

City	State	Zip Code
Green Bay	WI	54311

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

**Transaction ID : SB30B.23621**

Amount of Each Disbursement this Period

191.87
--------

Full Name (Last, First, Middle Initial)

**B. Nicole Larson**

Mailing Address S57W29595 Saylesville Rd

City	State	Zip Code
Waukesha	WI	53189

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2011

**Transaction ID : SB30B.23557**

Amount of Each Disbursement this Period

1213.01
---------

Full Name (Last, First, Middle Initial)

**C. Nicole Larson**

Mailing Address S57W29595 Saylesville Rd

City	State	Zip Code
Waukesha	WI	53189

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

**Transaction ID : SB30B.23618**

Amount of Each Disbursement this Period

1213.00
---------

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

2617.88
---------

--

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

PAGE 43 OF 61

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

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Larry Loomis**

Mailing Address 762 Briar Ln

City	State	Zip Code
Beloit	WI	53511-0000

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2011

**Transaction ID : SB30B.23567**

Amount of Each Disbursement this Period

560.09
--------

Full Name (Last, First, Middle Initial)

**B. Larry Loomis**

Mailing Address 762 Briar Ln

City	State	Zip Code
Beloit	WI	53511-0000

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

**Transaction ID : SB30B.23627**

Amount of Each Disbursement this Period

587.13
--------

Full Name (Last, First, Middle Initial)

**C. David R Luhman**

Mailing Address 616 Bartels St

City	State	Zip Code
Monona	WI	53718

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2011

**Transaction ID : SB30B.23568**

Amount of Each Disbursement this Period

712.87
--------

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

1860.09
---------

--

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

PAGE 44 OF 61

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

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. David R Luhman**

Mailing Address 616 Bartels St

City	State	Zip Code
Monona	WI	53718

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

**Transaction ID : SB30B.23628**

Amount of Each Disbursement this Period

674.27
--------

Full Name (Last, First, Middle Initial)

**B. Katherine A McCallum**

Mailing Address 1713 Park Street

City	State	Zip Code
Middleton	WI	53562

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

**Transaction ID : SB30B.23619**

Amount of Each Disbursement this Period

1599.54
---------

Full Name (Last, First, Middle Initial)

**C. Katherine A McCallum**

Mailing Address 1713 Park Street

City	State	Zip Code
Middleton	WI	53562

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2011

**Transaction ID : SB30B.23558**

Amount of Each Disbursement this Period

1599.54
---------

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

3873.35
---------

--

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

REPUBLICAN PARTY OF WISCONSIN

163.15

Category/  
Type

MM / DD / YYYY

214.19

Category/  
Type

99.29

Category/  
Type

476.63

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

PAGE 46 OF 61

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

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Paychex**

Mailing Address 911 Panorama Tr S

City	State	Zip Code
Rochester	NY	14625

Purpose of Disbursement  
Unemployment Insurance

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2011

**Transaction ID : SB30B.23574**

Amount of Each Disbursement this Period

291.83
--------

Full Name (Last, First, Middle Initial)

**B. Paychex**

Mailing Address 911 Panorama Tr S

City	State	Zip Code
Rochester	NY	14625

Purpose of Disbursement  
Payroll Taxes

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2011

**Transaction ID : SB30B.23575**

Amount of Each Disbursement this Period

7103.32
---------

Full Name (Last, First, Middle Initial)

**C. Paychex**

Mailing Address 911 Panorama Tr S

City	State	Zip Code
Rochester	NY	14625

Purpose of Disbursement  
Payroll Taxes

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

**Transaction ID : SB30B.23633**

Amount of Each Disbursement this Period

7078.10
---------

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

14473.25
----------

--

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

PAGE 47 OF 61

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

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Paychex**

Mailing Address 911 Panorama Tr S

City	State	Zip Code
Rochester	NY	14625

Purpose of Disbursement  
Unemployment Insurance

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

**Transaction ID : SB30B.23634**

Amount of Each Disbursement this Period

234.93
--------

Full Name (Last, First, Middle Initial)

**B. Paychex**

Mailing Address 911 Panorama Tr S

City	State	Zip Code
Rochester	NY	14625

Purpose of Disbursement  
Payroll Processing Fee

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

**Transaction ID : SB30B.23635**

Amount of Each Disbursement this Period

109.94
--------

Full Name (Last, First, Middle Initial)

**C. Scott Poole**

Mailing Address 1528 Sellery Street

City	State	Zip Code
Middleton	WI	53562-0000

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

**Transaction ID : SB30B.23629**

Amount of Each Disbursement this Period

387.20
--------

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

732.07
--------

--

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

PAGE 48 OF 61

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

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Scott R. Poole**

Mailing Address 1528 Sellery Street

City	State	Zip Code
Middleton	WI	53562

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2011

**Transaction ID : SB30B.23569**

Amount of Each Disbursement this Period

158.61
--------

Full Name (Last, First, Middle Initial)

**B. Daniel Resch**

Mailing Address 2 Northridge Terrace Apt C

City	State	Zip Code
Madison	WI	53704

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2011

**Transaction ID : SB30B.23570**

Amount of Each Disbursement this Period

676.87
--------

Full Name (Last, First, Middle Initial)

**C. Daniel Resch**

Mailing Address 2 Northridge Terrace Apt C

City	State	Zip Code
Madison	WI	53704

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

**Transaction ID : SB30B.23630**

Amount of Each Disbursement this Period

731.78
--------

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

1567.26
---------

--



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

PAGE 49 OF 61

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

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Sarah Thompson**

Mailing Address 409 W Gorham Street

City	State	Zip Code
Madison	WI	53703

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2011

**Transaction ID : SB30B.23571**

Amount of Each Disbursement this Period

581.60
--------

Full Name (Last, First, Middle Initial)

**B. Sarah Thompson**

Mailing Address 409 W Gorham Street

City	State	Zip Code
Madison	WI	53703

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

**Transaction ID : SB30B.23631**

Amount of Each Disbursement this Period

541.26
--------

Full Name (Last, First, Middle Initial)

**C. Stephan Thompson**

Mailing Address 148 E Johnson Street

City	State	Zip Code
Madison	WI	53703

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2011

**Transaction ID : SB30B.23550**

Amount of Each Disbursement this Period

2269.04
---------

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

3391.90
---------

--

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

PAGE 50 OF 61

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

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Stephan Thompson**

Mailing Address 148 E Johnson Street

City	State	Zip Code
Madison	WI	53703

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

**Transaction ID : SB30B.23610**

Amount of Each Disbursement this Period

2269.03
---------

Full Name (Last, First, Middle Initial)

**B. West Bend Mutual**

Mailing Address 1900 South 18th Ave

City	State	Zip Code
West Bend	WI	53095

Purpose of Disbursement  
Workers Comp Insurance

Candidate Name

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

State: District:

Disbursement For:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

**Transaction ID : SB30B.23597**

Amount of Each Disbursement this Period

1249.00
---------

Full Name (Last, First, Middle Initial)

**C. Joshua Wilson**

Mailing Address 641 West Main Street

City	State	Zip Code
Madison	WI	53703

Purpose of Disbursement  
Payroll

Candidate Name

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

State: District:

Disbursement For:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

**Transaction ID : SB30B.23632**

Amount of Each Disbursement this Period

507.19
--------

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

4025.22

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

PAGE 51 OF 61

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

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

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Joshua D. Wilson**

Mailing Address 641 W. Main Street

City Madison	State WI	Zip Code 53703
-----------------	-------------	-------------------

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2011

**Transaction ID : SB30B.23572**

Amount of Each Disbursement this Period

598.92
--------

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

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) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<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) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

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

598.92
--------

55495.99
----------

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

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

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

Transaction ID : H1.23527

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

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

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

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

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

Federal.....  %

Nonfederal .....  %

This ratio applies to (check all that apply):

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

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

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

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

Transaction ID : H1.23529

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

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

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

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

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

Federal.....  %

Nonfederal .....  %

This ratio applies to (check all that apply):

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

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

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

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF WISCONSIN

Transaction ID : H1.29955

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

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

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

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

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

Federal.....  %

Nonfederal .....  %

This ratio applies to (check all that apply):

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

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

PAGE 55 OF 61

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Verizon Wireless</b>		<b>Transaction ID : H4.23576</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 25505				
City Lehigh Valley	State PA	Zip Code 18002		
Purpose of Disbursement: Office Supplies			Allocated Activity or Event Year-To-Date 146632.82	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2011"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
22.81			40.56	63.37

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Veolia ES Solid Waste Midwest</b>		<b>Transaction ID : H4.23577</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 6484				
City Carol Stream	State IL	Zip Code 60197		
Purpose of Disbursement: Waste Removal			Allocated Activity or Event Year-To-Date 146775.73	
Activity or Event Identifier: Administrative		Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2011"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
51.45			91.46	142.91

<b>C. Full Name (Last, First, Middle Initial)</b> <b>The Prosper Group</b>		<b>Transaction ID : H4.23578</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 435 East Main Street				
City Greenwood	State IN	Zip Code 46143		
Purpose of Disbursement: Website			Allocated Activity or Event Year-To-Date 146900.73	
Activity or Event Identifier: Administrative		Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2011"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
45.00			80.00	125.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
119.26		212.02		331.28

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

PAGE 56 OF 61

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Pitney Bowes - Postage</b>		<b>Transaction ID : H4.23581</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 371874					
City Pittsburgh	State PA	Zip Code 15250-7874			
Purpose of Disbursement: Postage				Allocated Activity or Event Year-To-Date 154395.78	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 16 / 2011	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
2698.22			4796.83		7495.05

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Office Depot - 9485</b>		<b>Transaction ID : H4.23582</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Office Depot Credit Plan					
City Des Moines	State IA	Zip Code 50368-9027			
Purpose of Disbursement: Office Supplies				Allocated Activity or Event Year-To-Date 155054.16	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 16 / 2011	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
237.02			421.36		658.38

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Communications Plus</b>		<b>Transaction ID : H4.23584</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2788 Twilight Dr					
City Sun Prairie	State WI	Zip Code 53590			
Purpose of Disbursement: Office Machine Repair				Allocated Activity or Event Year-To-Date 155128.01	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 16 / 2011	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
26.59			47.26		73.85

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2961.83		5265.45		8227.28

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



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

PAGE 57 OF 61

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Coca-Cola Bottling Company</b>		<b>Transaction ID : H4.23585</b>		Allocated Activity or Event: <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 86					
City Minneapolis	State MN	Zip Code 55486			
Purpose of Disbursement: Office Supplies				Allocated Activity or Event Year-To-Date 155237.73	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date 09 / 16 / 2011	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
39.50			70.22		109.72

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Century Springs Bottling Co.</b>		<b>Transaction ID : H4.23586</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 275					
City Genesee Depot	State WI	Zip Code 53127-0000			
Purpose of Disbursement: Office Supplies				Allocated Activity or Event Year-To-Date 155336.23	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 16 / 2011	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
35.46			63.04		98.50

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Badgerland Chemical &amp; Supply</b>		<b>Transaction ID : H4.23587</b>		Allocated Activity or Event: <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					
City Middleton	State WI	Zip Code 53562			
Purpose of Disbursement: Office Supplies				Allocated Activity or Event Year-To-Date 155429.08	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 16 / 2011	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
33.43			59.42		92.85

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
108.39		192.68		301.07

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

PAGE 58 OF 61

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>MG&amp;E</b>		<b>Transaction ID : H4.23532</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO Box 1231				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Madison	State WI	Zip Code 53701		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Utilities				Allocated Activity or Event Year-To-Date 156599.76	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 30 / 2011	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
421.44			749.24		1170.68

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Pro One Janitorial</b>		<b>Transaction ID : H4.23594</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1101 Ashwaubenon St.				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Green Bay	State WI	Zip Code 54304		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Cleaning Service				Allocated Activity or Event Year-To-Date 157099.76	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 30 / 2011	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
180.00			320.00		500.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Charter - Madison</b>		<b>Transaction ID : H4.23595</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO Box 2981				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Milwaukee	State WI	Zip Code 53201-2981		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Cable				Allocated Activity or Event Year-To-Date 157248.77	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 30 / 2011	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
53.64			95.37		149.01

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
655.08		1164.61		1819.69

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

PAGE 59 OF 61

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Pitney Bowes Credit Corp</b>		<b>Transaction ID : H4.23596</b>		Allocated Activity or Event: <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 85460					
City Louisville	State KY	Zip Code 40285			
Purpose of Disbursement: Postage				Allocated Activity or Event Year-To-Date 158055.18	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date 09 / 30 / 2011	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
290.31			516.10		806.41

<b>B. Full Name (Last, First, Middle Initial)</b> <b>GE Capital</b>		<b>Transaction ID : H4.23598</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 740441					
City Atlanta	State GA	Zip Code 30374-0000			
Purpose of Disbursement: Office Machine Rental				Allocated Activity or Event Year-To-Date 159176.96	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 30 / 2011	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
403.84			717.94		1121.78

<b>C. Full Name (Last, First, Middle Initial)</b> <b>TDS Metrocom</b>		<b>Transaction ID : H4.23599</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 94510					
City Palatine	State IL	Zip Code 60094-0000			
Purpose of Disbursement: Phones				Allocated Activity or Event Year-To-Date 160243.81	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 30 / 2011	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
384.07			682.78		1066.85

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1078.22		1916.82		2995.04

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

PAGE 60 OF 61

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Service Specialists, Inc.</b>		<b>Transaction ID : H4.23601</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 160					
City Sun Prairie	State WI	Zip Code 53590			
Purpose of Disbursement: Office Machine Repair				Allocated Activity or Event Year-To-Date 160554.69	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date <input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
111.92			198.96		310.88

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Too Tall Tree</b>		<b>Transaction ID : H4.23602</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 4607 Camden Road					
City Madison	State WI	Zip Code 53716			
Purpose of Disbursement: Tree Removal				Allocated Activity or Event Year-To-Date 161354.69	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
288.00			512.00		800.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Shadow Fax</b>		<b>Transaction ID : H4.23604</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 4601 Helfesen Dr					
City Madison	State WI	Zip Code 53718			
Purpose of Disbursement: Office Supplies				Allocated Activity or Event Year-To-Date 162123.28	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
276.69			491.90		768.59

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
676.61		1202.86		1879.47

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

PAGE 61 OF 61

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF WISCONSIN**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>FLS Connect</b>		<b>Transaction ID : H4.23605</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 7300 Hudson Blvd #270				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City St. Paul	State MN	Zip Code 55128		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Conference Calls				Allocated Activity or Event Year-To-Date 162511.78	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date 09 / 30 / 2011	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
139.86			248.64		388.50

<b>B. Full Name (Last, First, Middle Initial)</b> <b>AT&amp;T - Long Distance</b>		<b>Transaction ID : H4.23609</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO Box 5017				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Carol Stream	State IL	Zip Code 60197-5017		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Long Distance				Allocated Activity or Event Year-To-Date 175845.10	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 30 / 2011	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4800.00			8533.32		13333.32

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

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4939.86		8781.96		13721.82

**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
10539.25		18736.40		29275.65