

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Sensenbrenner Committee

ADDRESS (number and street) PO Box 575 Brookfield WI 53008

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00083428 3. IS THIS REPORT NEW (N) OR AMENDED (A) WI 05

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) X October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER)

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on MM/DD/YYYY in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on MM/DD/YYYY in the State of

5. Covering Period MM/DD/YYYY 07/01/2015 through MM/DD/YYYY 09/30/2015

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

Type or Print Name of Treasurer John P. Savage

Signature of Treasurer John P. Savage [Electronically Filed] Date MM/DD/YYYY 10/12/2015

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

Office Use Only table with 8 columns and 1 row. FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Sensenbrenner Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	67851.99	145103.99
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	67851.99	145103.99
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	28633.18	99227.39
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	172.99
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	28633.18	99054.40
8. Cash on Hand at Close of Reporting Period (from Line 27).....	458046.52	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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 3 (Revised 12/2003)

Write or Type Committee Name

Sensenbrenner Committee

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	47949.99	74849.99
(ii) Unitemized.....	5902.00	14504.00
(iii) TOTAL of contributions from individuals ▶	53851.99	89353.99
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	14000.00	55750.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	67851.99	145103.99
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	172.99
15. OTHER RECEIPTS (Dividends, Interest, etc.)	48.46	216.98
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	67900.45	145493.96

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	28633.18	99227.39
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	28633.18	99227.39

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	418779.25
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	67900.45
25. SUBTOTAL (add Line 23 and Line 24).....	486679.70
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	28633.18
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	458046.52

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Sensenbrenner Committee

A. Full Name (Last, First, Middle Initial)
James Allen

Mailing Address S3 W31343 Walnut Hollow

City State Zip Code
Delafield WI 53018

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

Name of Employer Occupation
Allen Management, Inc. Business Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2015

Transaction ID : C-5-000019270008

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Steve Baldinger

Mailing Address 1147 Orchard Circle

City State Zip Code
Mendota Heights MN 55118

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

Name of Employer Occupation
Baldinger Bakery President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2015

Transaction ID : C-23-000130450002

Amount of Each Receipt this Period
1000.00

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

Mailing Address 15085 Bending Brae Ct.

City State Zip Code
Brookfield WI 53005

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

Name of Employer Occupation
Speed Systems, Inc. Small Business Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : C-28-000030410010

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 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Full Name (Last, First, Middle Initial)
Carla Bartlett

Mailing Address 9728 N Courtland Dr.

City Mequon State WI Zip Code 53092

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

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2015

Transaction ID : C-30-000122350004

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Jim Berg

Mailing Address 1962 Robins Run Road

City Hartford State WI Zip Code 53027

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

Name of Employer Custom Pak Products, Inc. Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2015

Transaction ID : C-41-000117030004

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
John Butler

Mailing Address 1005 Augusta Avenue

City Wausau State WI Zip Code 54403

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

Name of Employer The Plastic Surgery and Vein Clinic Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 02 / 2015

Transaction ID : C-61-000063960013

Amount of Each Receipt this Period
250.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Full Name (Last, First, Middle Initial)
James Caraway

Mailing Address 9364 N Lake Drive

City Bayside State WI Zip Code 53217

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

Name of Employer Self Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2015

Transaction ID : C-65-000061410006

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Jerry Couri

Mailing Address 1215 Seitz Dr.

City Waukesha State WI Zip Code 53186

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

Name of Employer Couri Insurance Agency Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2015

Transaction ID : C-77-000132110002

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Judie Couri

Mailing Address 1215 Seitz Dr.

City Waukesha State WI Zip Code 53186

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

Name of Employer Couri Insurance Agency Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2015

Transaction ID : C-78-000132120002

Amount of Each Receipt this Period
500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Full Name (Last, First, Middle Initial)
Scott Dacey

Mailing Address 139 Trent Shores Drive

City State Zip Code
Trent Woods NC 28562

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

Name of Employer Occupation
PACE Government Relations Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : C-80-000038610007

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Russell Darrow

Mailing Address 4664 Cedar Park Dr

City State Zip Code
West Bend WI 53095

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

Name of Employer Occupation
Russ Darrow Group Chairman and CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2015

Transaction ID : C-84-00000840019

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mark Disler

Mailing Address 6414 Nedle Leaf Drive

City State Zip Code
Rockville MD 20852

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

Name of Employer Occupation
Prime Policy Group Government Relations

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2015

Transaction ID : C-94-000071360010

Amount of Each Receipt this Period
250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Full Name (Last, First, Middle Initial)
Wolfgang Dorner

Mailing Address 5166 N. Highway 83

City Hartland State WI Zip Code 53029

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

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 10 / 2015

Transaction ID : C-98-000133640001

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Jay Franke

Mailing Address 65 E. Goethe

City Chicago State IL Zip Code 60610

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

Name of Employer Self Occupation Artist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4599.99

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : C-123-000133980001

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
Jay Franke

Mailing Address 65 E. Goethe

City Chicago State IL Zip Code 60610

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

Name of Employer Self Occupation Artist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4599.99

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : C-124-000133980002

Amount of Each Receipt this Period
1899.99

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

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

4849.99

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Full Name (Last, First, Middle Initial)
David French

Mailing Address W303 N2568 Maple Ave.

City State Zip Code
Pewaukee WI 53072

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

Name of Employer Occupation
N/A Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2015

Transaction ID : C-126-000128670003

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Gerald Frye

Mailing Address 940 Madera Circle

City State Zip Code
Elm Grove WI 53122

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

Name of Employer Occupation
The Benefit Services Group, Inc. President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2015

Transaction ID : C-129-000121940002

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Joseph Geenen

Mailing Address N5964 Oakland Road

City State Zip Code
Nashotah WI 53058

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

Name of Employer Occupation
N/A Retired Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2015

Transaction ID : C-131-000079110005

Amount of Each Receipt this Period
500.00

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 11 OF 45
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Full Name (Last, First, Middle Initial)
Bronwyn Glojek

Mailing Address W238 N3251 High Meadow Court

City State Zip Code
Pewaukee WI 53072

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

Name of Employer Occupation
N/A Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2015

Transaction ID : C-139-000074670010

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Thomas Gould

Mailing Address 10248 N. Westport Circle

City State Zip Code
Mequon WI 53092

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

Name of Employer Occupation
N/A Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 02 / 2015

Transaction ID : C-143-000116340005

Amount of Each Receipt this Period
250.00

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

Mailing Address 777 N. Prospect Ave.

City State Zip Code
Milwaukee WI 53202

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

Name of Employer Occupation
Bradley Foundation President/ CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2015

Transaction ID : C-148-000049640006

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 12 OF 45
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Full Name (Last, First, Middle Initial)
Claire Greene

Mailing Address 1840 N Prospect Ave., #412

City Milwaukee State WI Zip Code 53202

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 08 / 2015

Transaction ID : C-150-00002130030

Amount of Each Receipt this Period
 _____ 300.00

B. Full Name (Last, First, Middle Initial)
Claire Greene

Mailing Address 1840 N Prospect Ave., #412

City Milwaukee State WI Zip Code 53202

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : C-151-00002130031

Amount of Each Receipt this Period
 _____ 1500.00

C. Full Name (Last, First, Middle Initial)
Jenna Hamilton

Mailing Address 4225 Sonia Court

City Alexandria State VA Zip Code 22309

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

Name of Employer Capitol Legislative Strategies Occupation Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2015

Transaction ID : C-157-00013410001

Amount of Each Receipt this Period
 _____ 500.00

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

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

_____ 2300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Full Name (Last, First, Middle Initial)
Jeffrey Harris

Mailing Address 18235 W. Burleigh Rd.

City: Brookfield State: WI Zip Code: 53045

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

Name of Employer: N/A Occupation: Retired - Private Investor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 07 / 07 / 2015

Transaction ID : C-162-00011680005

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
David Haskell

Mailing Address 1255 Lakeside Dr.

City: Elm Grove State: WI Zip Code: 53122

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

Name of Employer: Self Occupation: Orthopedic Surgeon

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 07 / 08 / 2015

Transaction ID : C-165-000126560003

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
David Herro

Mailing Address 65 E. Goethe

City: Chicago State: IL Zip Code: 60610

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

Name of Employer: Harris Associates Occupation: Investment Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 5400.00

Date of Receipt: 09 / 15 / 2015

Transaction ID : C-170-000133960001

Amount of Each Receipt this Period: 2700.00

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

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Full Name (Last, First, Middle Initial)
David Herro

Mailing Address 65 E. Goethe

City Chicago State IL Zip Code 60610

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

Name of Employer Harris Associates Occupation Investment Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : C-171-000133960002

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
Robert Jung

Mailing Address 1545 Barrington Woods Dr.

City Brookfield State WI Zip Code 53045

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

Name of Employer Trico Corporation Occupation President & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 11 / 2015

Transaction ID : C-193-000120350003

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
John Kaneb

Mailing Address 34 Masconomo St.

City Manchester State MA Zip Code 01944

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

Name of Employer Catamount Management Corp. Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2015

Transaction ID : C-197-000133810001

Amount of Each Receipt this Period
2700.00

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

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

6400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Full Name (Last, First, Middle Initial)
John Kaneb

Mailing Address 34 Masconomo St.

City Manchester State MA Zip Code 01944

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

Name of Employer Catamount Management Corp. Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2015

Transaction ID : C-198-000133810002

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
Virginia Kaneb

Mailing Address 34 Masconomo St.

City Manchester State MA Zip Code 01944

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2015

Transaction ID : C-199-000133800001

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
Virginia Kaneb

Mailing Address 34 Masconomo St.

City Manchester State MA Zip Code 01944

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2015

Transaction ID : C-200-000133800002

Amount of Each Receipt this Period
2700.00

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

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

8100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Full Name (Last, First, Middle Initial)
James Klauser

Mailing Address W281 N3416 Taylors Woods Road SW

City State Zip Code
Pewaukee WI 53072

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

Name of Employer Occupation
NA Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2015

Transaction ID : C-209-000091270011

Amount of Each Receipt this Period
500.00

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

Mailing Address W509 Highway O

City State Zip Code
Hartford WI 53072

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

Name of Employer Occupation
Krieger Barrels, Inc VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 10 / 2015

Transaction ID : C-226-000005670008

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Kathryn Kuhn

Mailing Address 2451 N. 93rd St.

City State Zip Code
Wauwatosa WI 53226

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

Name of Employer Occupation
Medical College of Wisconsin VP Government and Community Relations

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 01 / 2015

Transaction ID : C-232-000091700005

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Full Name (Last, First, Middle Initial)
John Lee

Mailing Address 3086 Kettle Moraine Road

City State Zip Code
Hartford WI 53027

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

Name of Employer Occupation
Lee Precision, Inc. President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2015

Transaction ID : C-242-000049810016

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Randall Mays

Mailing Address 12525 N. La Belle Court

City State Zip Code
Mequon WI 53092

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

Name of Employer Occupation
Frontier Science Statistician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2015

Transaction ID : C-281-000084610004

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Jon McGlocklin

Mailing Address 5281 N. Hwy 83

City State Zip Code
Hartland WI 53029

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

Name of Employer Occupation
MACC Fund President and Co-founder

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2015

Transaction ID : C-288-000087060003

Amount of Each Receipt this Period
250.00

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 18 OF 45
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Full Name (Last, First, Middle Initial)
Patricia McKeithan

Mailing Address 7975 N. Range Line Road

City Milwaukee State WI Zip Code 53217

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

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 03 / 2015

Transaction ID : C-289-000049630005

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Sandra Mills

Mailing Address 1500 Rue Reynard

City Menasha State WI Zip Code 54952

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

Name of Employer Self Occupation Ph.D. Researcher in Education

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 08 / 2015

Transaction ID : C-295-000128860002

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
William and Rebecca Milne

Mailing Address 5456 Shannon Road

City Hartford State WI Zip Code 53027

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

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 25 / 2015

Transaction ID : C-296-000107100003

Amount of Each Receipt this Period
 1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Full Name (Last, First, Middle Initial)
Albert Nicholas

Mailing Address 6002 N Hwy 83

City Chenequa State WI Zip Code 53029

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

Name of Employer: Nicholas Company, Inc. Occupation: Investments

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 03 / 2015

Transaction ID : C-315-00008850013

Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Bonnie Obernberger

Mailing Address 5927 Quaker Hill Road

City Racine State WI Zip Code 53406

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

Name of Employer: N/A Occupation: Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 700.00

Date of Receipt: 08 / 19 / 2015

Transaction ID : C-321-000088600009

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
John Ogden

Mailing Address 1840 N. Prospect Ave., Apt. 211

City Milwaukee State WI Zip Code 53202

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

Name of Employer: Ogden, The Real Estate Company Occupation: Realtor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 09 / 01 / 2015

Transaction ID : C-322-00008790038

Amount of Each Receipt this Period: 500.00

Earmarked through Realtors Direct Giver

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Full Name (Last, First, Middle Initial)
Daniel Rosen

Mailing Address 123 North Third Street

City Minneapolis State MN Zip Code 55401

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

Name of Employer Parker Rosen, LLC Occupation Lawyer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2015

Transaction ID : C-373-000130350002

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Joanne Snow

Mailing Address 12 Old Bridle Path

City Lawrenceville State NJ Zip Code 08648

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

Name of Employer Advanced Eye MDs Occupation CFO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2015

Transaction ID : C-416-000134010001

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Richard Star

Mailing Address 19045 Thomson Drive, Unit I-204

City Brookfield State WI Zip Code 53045

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

Name of Employer Engman - Taylor Co. Occupation Chairman of the Board

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 02 / 2015

Transaction ID : C-421-000114260009

Amount of Each Receipt this Period
 250.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Full Name (Last, First, Middle Initial)
George Steil

Mailing Address 724 Thornecrest Ct.

City Janesville State WI Zip Code 53546

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

Name of Employer Brennan Steil S.C. Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 03 / 2015

Transaction ID : C-423-000133730001

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Wolfgang Strohwig

Mailing Address 3285 Industrial Rd.

City Richfield State WI Zip Code 53076

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

Name of Employer Strohwig Industries Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 10 / 2015

Transaction ID : C-431-000133630001

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Don and Carol Taylor

Mailing Address 27100 Shananagi Lane

City Waukesha State WI Zip Code 53188

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

Name of Employer Waukesha State Bank Occupation Vice President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 19 / 2015

Transaction ID : C-438-000085780010

Amount of Each Receipt this Period
 1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Full Name (Last, First, Middle Initial)
Dwyn Von Bereghy

Mailing Address 6354 Brumder Dr

City Hartland State WI Zip Code 53029

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

Name of Employer N/A Occupation Retired President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2015

Transaction ID : C-469-000039830013

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Richard Wilkey

Mailing Address 5112 Hwy. 83

City Hartland State WI Zip Code 53029

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

Name of Employer The Fisher Barton Group Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 01 / 2015

Transaction ID : C-486-000099890008

Amount of Each Receipt this Period
1000.00

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

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)

Election Cycle-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).....

1500.00

47949.99

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 45
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Full Name (Last, First, Middle Initial)
AMFAM Federal PAC

Mailing Address 6000 American Parkway

City Madison State WI Zip Code 53783

FEC ID number of contributing federal political committee. **C** C00354290

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 01 / 2015

Transaction ID : C-2-000100910008

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
American Bankers Association PAC

Mailing Address 1120 Connecticut Ave N.W.

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2015

Transaction ID : C-8-000038060040

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
American Podiatric Medical Association

Mailing Address 9312 Old Georgetown Road

City Bethesda State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C** C00008839

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2015

Transaction ID : C-12-000079970004

Amount of Each Receipt this Period
1500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 45
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Full Name (Last, First, Middle Initial)
Exxon Mobil PAC

Mailing Address 5959 Las Colinas Blvd.

City Irving State TX Zip Code 75039

FEC ID number of contributing federal political committee. **C** C00095406

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 06 / 2015

Transaction ID : C-111-000087000005

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
Foley & Lardner Political Fund

Mailing Address 3000 K Street, NW, 6th Floor

City Washington State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C** C00105338

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 29 / 2015

Transaction ID : C-120-000084880011

Amount of Each Receipt this Period
 1500.00

C. Full Name (Last, First, Middle Initial)
INTEGRAPAC of INTEGRA TELECOM HOLDINGS

Mailing Address 1201 NE Lloyd Blvd., Suite 500

City Portland State OR Zip Code 97232

FEC ID number of contributing federal political committee. **C** C00428094

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : C-180-000117340005

Amount of Each Receipt this Period
 500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 45
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Full Name (Last, First, Middle Initial)
Nelson Mullins Riley and Scarborough PAC

Mailing Address PO Box 11070

City Columbia State SC Zip Code 29211

FEC ID number of contributing federal political committee. **C** C00278895

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2015

Transaction ID : C-313-000134090001

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Realtors Direct Giver Program Conduit Acc.

Mailing Address 4801 Forest Run Rd., Suite 201

City Madison State WI Zip Code 53704

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 01 / 2015

Transaction ID : C-350-000123170002

Amount of Each Receipt this Period
 500.00

[MEMO ITEM]
 Total earmarked through conduit

C. Full Name (Last, First, Middle Initial)
Sprint Corporation PAC

Mailing Address 6450 Sprint Parkway

City Overland Park State KS Zip Code 66251

FEC ID number of contributing federal political committee. **C** C00089342

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2015

Transaction ID : C-419-000134070001

Amount of Each Receipt this Period
 1000.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 45
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Full Name (Last, First, Middle Initial)
US Cellular Corp. PAC

Mailing Address 8410 W. Bryn Mawr Ave., Suite 700

City Chicago State IL Zip Code 60631

FEC ID number of contributing federal political committee. **C** C00336057

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2015

Transaction ID : C-460-000134120001

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Windstream PAC

Mailing Address 4001 Rodney Parham Rd.

City Little Rock State AR Zip Code 72212

FEC ID number of contributing federal political committee. **C** C00425975

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2015

Transaction ID : C-490-000127950003

Amount of Each Receipt this Period
 1500.00

C. Full Name (Last, First, Middle Initial)
XO Communications PAC

Mailing Address 13865 Sunrise Valley Drive, 4th Fl

City Herndon State VA Zip Code 20171

FEC ID number of contributing federal political committee. **C** C00342238

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : C-497-000088960008

Amount of Each Receipt this Period
 2500.00

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

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

5000.00

14000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 45
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Full Name (Last, First, Middle Initial)
US Bank

Mailing Address P. O. Box 1800

City Saint Paul State MN Zip Code 55101

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **216.98**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : C-457-000031480271

Amount of Each Receipt this Period
 18.17

B. Full Name (Last, First, Middle Initial)
US Bank

Mailing Address P. O. Box 1800

City Saint Paul State MN Zip Code 55101

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **216.98**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 30 / 2015

Transaction ID : C-458-000031480272

Amount of Each Receipt this Period
 15.39

C. Full Name (Last, First, Middle Initial)
US Bank

Mailing Address P. O. Box 1800

City Saint Paul State MN Zip Code 55101

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **216.98**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : C-459-000031480273

Amount of Each Receipt this Period
 14.90

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

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

48.46

48.46

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 45	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

Full Name (Last, First, Middle Initial) A. 120 Building Associates		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 120 Bishops Way, Room 111		Amount of Each Disbursement this Period 167.50 Transaction ID : D8-000120150039
City Brookfield	State WI	
Zip Code 53005	Purpose of Disbursement Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. 120 Building Associates		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2015
Mailing Address 120 Bishops Way, Room 111		Amount of Each Disbursement this Period 167.50 Transaction ID : D9-000120150040
City Brookfield	State WI	
Zip Code 53005	Purpose of Disbursement Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. 120 Building Associates		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2015
Mailing Address 120 Bishops Way, Room 111		Amount of Each Disbursement this Period 167.50 Transaction ID : D10-000120150041
City Brookfield	State WI	
Zip Code 53005	Purpose of Disbursement Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	502.50
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 45	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

Full Name (Last, First, Middle Initial) A. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2015
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 72.10
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Mobile phone	Transaction ID : D23-000120280038
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2015
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 72.10
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Mobile phone	Transaction ID : D24-000120280039
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2015
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 72.10
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Mobile phone	Transaction ID : D25-000120280040
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	216.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 45			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2015
Mailing Address PO BOX 598011		Amount of Each Disbursement this Period 170.09 Transaction ID : D36-000052270199
City Orlando	State FL	
Zip Code 32859	Purpose of Disbursement Phone/ Internet	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2015
Mailing Address PO BOX 598011		Amount of Each Disbursement this Period 165.70 Transaction ID : D37-000052270200
City Orlando	State FL	
Zip Code 32859	Purpose of Disbursement Phone/ Internet	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2015
Mailing Address PO BOX 598011		Amount of Each Disbursement this Period 163.21 Transaction ID : D38-000052270201
City Orlando	State FL	
Zip Code 32859	Purpose of Disbursement Phone/ Internet	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	499.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 45			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

Full Name (Last, First, Middle Initial) A. Colonial Quality Printing			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2015	
Mailing Address 2997 S. Howell Avenue			Amount of Each Disbursement this Period 1643.76	
City Milwaukee	State WI	Zip Code 53207	Transaction ID : D69-000052640096	
Purpose of Disbursement Printing - Invitations		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

Full Name (Last, First, Middle Initial) B. Paperless Transaction Corp.			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015	
Mailing Address 400 E. Royal Ln., Suite 201			Amount of Each Disbursement this Period 118.25	
City Irving	State TX	Zip Code 75039	Transaction ID : D152-000119640042	
Purpose of Disbursement Merchant fee		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

Full Name (Last, First, Middle Initial) C. Paperless Transaction Corp.			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2015	
Mailing Address 400 E. Royal Ln., Suite 201			Amount of Each Disbursement this Period 95.68	
City Irving	State TX	Zip Code 75039	Transaction ID : D153-000119640043	
Purpose of Disbursement Merchant fee		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1857.69
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 45			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

Full Name (Last, First, Middle Initial)
A. Paperless Transaction Corp.

Mailing Address 400 E. Royal Ln., Suite 201

City Irving State TX Zip Code 75039

Purpose of Disbursement Merchant fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement 09 / 30 / 2015

Amount of Each Disbursement this Period 391.26

Transaction ID : D154-000119640044

Full Name (Last, First, Middle Initial)
B. US Bank

Mailing Address 777 E. Wisconsin Ave

City Milwaukee State WI Zip Code 53202

Purpose of Disbursement w/h

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement 07 / 14 / 2015

Amount of Each Disbursement this Period 397.98

Transaction ID : D200-000052220285

Full Name (Last, First, Middle Initial)
c. US Bank

Mailing Address 777 E. Wisconsin Ave

City Milwaukee State WI Zip Code 53202

Purpose of Disbursement w/h

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement 08 / 14 / 2015

Amount of Each Disbursement this Period 51.00

Transaction ID : D201-000052220286

SUBTOTAL of Disbursements This Page (optional) 840.24

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 45			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

Full Name (Last, First, Middle Initial) A. US Bank		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2015
Mailing Address 777 E. Wisconsin Ave		Amount of Each Disbursement this Period 25.50
City Milwaukee	State WI	
Zip Code 53202	Purpose of Disbursement w/h	Transaction ID : D202-000052220287
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. US Bank		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address P. O. Box 790408		Amount of Each Disbursement this Period 1487.36
City Saint Louis	State MO	
Zip Code 63179	Purpose of Disbursement Credit card payment	Transaction ID : D219-000077140258
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address 300 First Street, SE		Amount of Each Disbursement this Period 249.35
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Food and bev	Transaction ID : D4-000052840024
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1512.86
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 45			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

Full Name (Last, First, Middle Initial) A. Charlie Palmer Steak			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address 101 Constitution Ave NW			Amount of Each Disbursement this Period 476.55
City Washington	State DC	Zip Code 20001	
Purpose of Disbursement Fundraiser food and bev		Category/ Type	Transaction ID : D5-000133700001
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State:	District:		

Full Name (Last, First, Middle Initial) B. Milwaukee Journal Sentinel			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address PO Box 371			Amount of Each Disbursement this Period 8.62
City Milwaukee	State WI	Zip Code 53201	
Purpose of Disbursement Online subscription		Category/ Type	Transaction ID : D8-000082800054
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State:	District:		

Full Name (Last, First, Middle Initial) c. Public Storage			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address 1643 Arcadian Avenue			Amount of Each Disbursement this Period 230.00
City Waukesha	State WI	Zip Code 53186	
Purpose of Disbursement Storage unit		Category/ Type	Transaction ID : D11-000052240250
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 45			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

Full Name (Last, First, Middle Initial) A. web.com		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address 303 Peach Tree Suite 500		Amount of Each Disbursement this Period 2015 105.85
City Atlanta	State GA Zip Code 30303	
Purpose of Disbursement Website	Category/Type	Transaction ID : D12-000082720154 [MEMO ITEM] Credit Card Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. US Bank		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2015
Mailing Address P. O. Box 790408		Amount of Each Disbursement this Period 2015 25.00
City Saint Louis	State MO Zip Code 63179	
Purpose of Disbursement Bank fee	Category/Type	Transaction ID : D220-000077140259
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. US Bank		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2015
Mailing Address P. O. Box 790408		Amount of Each Disbursement this Period 2015 2885.65
City Saint Louis	State MO Zip Code 63179	
Purpose of Disbursement Credit Card Payment	Category/Type	Transaction ID : D221-000077140260
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2910.65
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 45			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

Full Name (Last, First, Middle Initial) A. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2015
Mailing Address 300 First Street, SE			Amount of Each Disbursement this Period 221.70
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Food and bev		Category/ Type	Transaction ID : D1-000052840025
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM] Credit Card Item
State: District:			

Full Name (Last, First, Middle Initial) B. Clark Station			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2015
Mailing Address 4000 N. Wilson Drive			Amount of Each Disbursement this Period 45.85
City Milwaukee	State WI	Zip Code 53211	
Purpose of Disbursement Gas		Category/ Type	Transaction ID : D2-000107670015
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM] Credit Card Item
State: District:			

Full Name (Last, First, Middle Initial) C. Milwaukee Athletic Club			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2015
Mailing Address 758 N. Broadway			Amount of Each Disbursement this Period 1740.04
City Milwaukee	State WI	Zip Code 53202	
Purpose of Disbursement Fundraiser food and bev		Category/ Type	Transaction ID : D4-000096060005
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM] Credit Card Item
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 45			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

Full Name (Last, First, Middle Initial) A. Milwaukee Journal Sentinel		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2015
Mailing Address PO Box 371		Amount of Each Disbursement this Period 8.62
City Milwaukee	State WI	
Zip Code 53201	Purpose of Disbursement Online subscription	Transaction ID : D5-000082800055
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) B. Mitchell's Fish Market		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2015
Mailing Address 275 N Moorland Rd.		Amount of Each Disbursement this Period 100.31
City Brookfield	State WI	
Zip Code 53005	Purpose of Disbursement Food and bev	Transaction ID : D6-000100120005
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2015
Mailing Address 6600 N Military Trl Online		Amount of Each Disbursement this Period 208.33
City Boca Raton	State FL	
Zip Code 33496	Purpose of Disbursement Office supplies	Transaction ID : D7-000129590003
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 45			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. Public Storage		M M / D D / Y Y Y Y 08 / 20 / 2015	
Mailing Address 1643 Arcadian Avenue		Amount of Each Disbursement this Period	
City Waukesha State WI Zip Code 53186		247.00	
Purpose of Disbursement Storage unit		Transaction ID : D8-000052240251	
Candidate Name		[MEMO ITEM] Credit Card Item	
Office Sought:	House Senate President	Disbursement For: 2016	
	<input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input checked="" type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. web.com		M M / D D / Y Y Y Y 08 / 20 / 2015	
Mailing Address 303 Peach Tree Suite 500		Amount of Each Disbursement this Period	
City Atlanta State GA Zip Code 30303		72.90	
Purpose of Disbursement Website		Transaction ID : D12-000082720155	
Candidate Name		[MEMO ITEM] Credit Card Item	
Office Sought:	House Senate President	Disbursement For: 2016	
	<input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input checked="" type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. US Bank		M M / D D / Y Y Y Y 08 / 20 / 2015	
Mailing Address P. O. Box 790408		Amount of Each Disbursement this Period	
City Saint Louis State MO Zip Code 63179		25.00	
Purpose of Disbursement Bank fee		Transaction ID : D222-000077140261	
Candidate Name		[MEMO ITEM] Credit Card Item	
Office Sought:	House Senate President	Disbursement For: 2016	
	<input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input checked="" type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	25.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 45			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. US Bank

Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 790408

City Saint Louis State MO Zip Code 63179

Purpose of Disbursement Credit card payment

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 09 / 2015

Amount of Each Disbursement this Period: 564.08

Transaction ID : D223-000077140262

B. Capitol Hill Club

Full Name (Last, First, Middle Initial)

Mailing Address 300 First Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Food and bev.

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 09 / 2015

Amount of Each Disbursement this Period: 60.00

Transaction ID : D1-000052840026

[MEMO ITEM]
Credit Card Item

C. Milwaukee Journal Sentinel

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 371

City Milwaukee State WI Zip Code 53201

Purpose of Disbursement Online subscription

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 09 / 2015

Amount of Each Disbursement this Period: 8.62

Transaction ID : D4-000082800056

[MEMO ITEM]
Credit Card Item

SUBTOTAL of Disbursements This Page (optional)..... 564.08

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 45			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

Full Name (Last, First, Middle Initial) A. Mitchell's Fish Market		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2015
Mailing Address 275 N Moorland Rd.		Amount of Each Disbursement this Period 128.19
City Brookfield	State WI	
Zip Code 53005	Purpose of Disbursement Food and bev	[MEMO ITEM] Credit Card Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Public Storage		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2015
Mailing Address 1643 Arcadian Avenue		Amount of Each Disbursement this Period 247.00
City Waukesha	State WI	
Zip Code 53186	Purpose of Disbursement Storage unit	[MEMO ITEM] Credit Card Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. web.com		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2015
Mailing Address 303 Peach Tree Suite 500		Amount of Each Disbursement this Period 72.90
City Atlanta	State GA	
Zip Code 30303	Purpose of Disbursement Website	[MEMO ITEM] Credit Card Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 45			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

Full Name (Last, First, Middle Initial) A. US Bank		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address P. O. Box 790408		Amount of Each Disbursement this Period 25.00
City Saint Louis	State MO	
Zip Code 63179	Purpose of Disbursement Bank fee	Transaction ID : D224-000077140263
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Victory Enterprises		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 5200 S.W. 30th St., Ste. 7		Amount of Each Disbursement this Period 2000.00
City Davenport	State IA	
Zip Code 52802	Purpose of Disbursement Consulting	Transaction ID : D243-000118430041
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Victory Enterprises		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 5200 S.W. 30th St., Ste. 7		Amount of Each Disbursement this Period 10277.14
City Davenport	State IA	
Zip Code 52802	Purpose of Disbursement Fundraising mailing	Transaction ID : D244-000118430042
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	12302.14
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 45			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Victory Enterprises

Full Name (Last, First, Middle Initial)
Mailing Address 5200 S.W. 30th St., Ste. 7

City Davenport State IA Zip Code 52802

Purpose of Disbursement Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 03 / 2015

Amount of Each Disbursement this Period: 2000.00

Transaction ID : D245-000118430043

B. Victory Enterprises

Full Name (Last, First, Middle Initial)
Mailing Address 5200 S.W. 30th St., Ste. 7

City Davenport State IA Zip Code 52802

Purpose of Disbursement Web hosting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 03 / 2015

Amount of Each Disbursement this Period: 105.00

Transaction ID : D246-000118430044

c. Victory Enterprises

Full Name (Last, First, Middle Initial)
Mailing Address 5200 S.W. 30th St., Ste. 7

City Davenport State IA Zip Code 52802

Purpose of Disbursement Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 01 / 2015

Amount of Each Disbursement this Period: 2000.00

Transaction ID : D247-000118430045

SUBTOTAL of Disbursements This Page (optional) 4105.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 45			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

A. Waukesha County GOP

Full Name (Last, First, Middle Initial)
Mailing Address 1701 Pearl St., Suite 5

City Waukesha State WI Zip Code 53186

Purpose of Disbursement
Grazing With the Elephants

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 01 / 2015

Amount of Each Disbursement this Period: 350.00

Transaction ID : D254-000052600034

B. Westmoor Country Club

Full Name (Last, First, Middle Initial)
Mailing Address 400 S. Moorland Road

City Brookfield State WI Zip Code 53005

Purpose of Disbursement
Fundraiser food and bev

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 09 / 2015

Amount of Each Disbursement this Period: 2008.33

Transaction ID : D255-000133910001

C. Alec Zimmerman

Full Name (Last, First, Middle Initial)
Mailing Address 1241 E. Meinecke Ave.

City Milwaukee State WI Zip Code 53212

Purpose of Disbursement
Salary

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 01 / 2015

Amount of Each Disbursement this Period: 153.92

Transaction ID : D272-000120430047

SUBTOTAL of Disbursements This Page (optional) 2512.25

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 45			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

Full Name (Last, First, Middle Initial) A. Alec Zimmerman		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 1241 E. Meinecke Ave.		Amount of Each Disbursement this Period 117.30 Transaction ID : D273-000120430048
City Milwaukee	State WI	
Zip Code 53212	Purpose of Disbursement Mileage reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Alec Zimmerman		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2015
Mailing Address 1241 E. Meinecke Ave.		Amount of Each Disbursement this Period 153.92 Transaction ID : D274-000120430049
City Milwaukee	State WI	
Zip Code 53212	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Alec Zimmerman		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2015
Mailing Address 1241 E. Meinecke Ave.		Amount of Each Disbursement this Period 145.47 Transaction ID : D275-000120430050
City Milwaukee	State WI	
Zip Code 53212	Purpose of Disbursement Mileage reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	416.69
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 45	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Sensenbrenner Committee

Full Name (Last, First, Middle Initial) A. Alec Zimmerman		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2015
Mailing Address 1241 E. Meinecke Ave.		Amount of Each Disbursement this Period 153.92
City Milwaukee	State WI	
Zip Code 53212	Purpose of Disbursement Salary	Transaction ID : D276-000120430051
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	153.92
TOTAL This Period (last page this line number only).....	28418.32