

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

Mike Gallagher for Wisconsin

ADDRESS (number and street)

PO Box 1027

Check if different than previously reported. (ACC)

Green Bay

WI

54305

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00610212

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

WI

08

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)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

(c) 30-Day **POST**-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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

Kilgore, Paul, , ,

Signature of Treasurer

Kilgore, Paul, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Mike Gallagher for Wisconsin

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))....	18281.24	19481.36
(b) Total Contribution Refunds (from Line 20(d))	11017.60	15344.32
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	7263.64	4137.04
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	66272.36	93812.05
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	66272.36	93812.05
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1169361.53	
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 05/2016)

Write or Type Committee Name

Mike Gallagher for Wisconsin

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).....	3837.70	4564.36
(ii) Unitemized.....	1443.54	1917.00
(iii) TOTAL of contributions from individuals ▶	5281.24	6481.36
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	13000.00	13000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	18281.24	19481.36
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	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	8.22	8.22
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	18289.46	19489.58

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 26

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	66272.36	93812.05
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	11017.60	14844.32
(b) Political Party Committees.....	0.00	500.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	11017.60	15344.32
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	77289.96	109156.37

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1228362.03
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	18289.46
25. SUBTOTAL (add Line 23 and Line 24).....	1246651.49
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	77289.96
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1169361.53

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

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

FOR LINE NUMBER: PAGE 5 OF 26
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Mike Gallagher for Wisconsin

A. Full Name (Last, First, Middle Initial)
CHRISTBAUM, JAMES, R., ,
 Mailing Address P.O. BOX 591
 City STURGEON BAY State WI Zip Code 54235-0591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 840.40

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 01 / 2020
Transaction ID : SA11A.21215
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KIMBROUGH, LYND A, , ,
 Mailing Address 1225 AUTUMN PINES DR.
 City ORANGE PARK State FL Zip Code 32065-2693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 410.25

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 28 / 2020
Transaction ID : SA11A.21187
 Amount of Each Receipt this Period
 26.35
 Memo Item
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KIMBROUGH, LYND A, , ,
 Mailing Address 1225 AUTUMN PINES DR.
 City ORANGE PARK State FL Zip Code 32065-2693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 410.25

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2020
Transaction ID : SA11A.21548
 Amount of Each Receipt this Period
 26.35
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 102.70
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 6 OF 26
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mike Gallagher for Wisconsin

A. Full Name (Last, First, Middle Initial)
KOLOSSO, WILLIAM, J., MR.,

Mailing Address W4191 DEL ROSE LN

City: APPLETON State: WI Zip Code: 54913-7813

FEC ID number of contributing federal political committee: C

Name of Employer: INFORMATION REQUESTED PER BEST EFF Occupation: INFORMATION REQUESTED PER BEST EFF

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 250.00

Date of Receipt: 12 / 10 / 2020

Transaction ID : SA11A.21209

Amount of Each Receipt this Period: 250.00

Memo Item CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TRADER, JAMES, E., MR.,

Mailing Address 816 ASH STREET

City: GREEN BAY State: WI Zip Code: 54313-6928

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 300.00

Date of Receipt: 12 / 10 / 2020

Transaction ID : SA11A.21198

Amount of Each Receipt this Period: 50.00

Memo Item CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WISCONSIN HOSPITALS CONDUIT

Mailing Address 5510 RESEARCH PARK DR

City: MADISON State: WI Zip Code: 53711-5372

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 7350.00

Date of Receipt: 12 / 10 / 2020

Transaction ID : SA11A.21210

Amount of Each Receipt this Period: 500.00

Memo Item CONTRIBUTION

POSTMARKED 10/30/2020; SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

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

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

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

FOR LINE NUMBER: PAGE 7 OF 26
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mike Gallagher for Wisconsin

A. Full Name (Last, First, Middle Initial)
BORGERDING, ERIC, , ,

Mailing Address 325 GLACIER RIDGE TRAIL

City VERONA State WI Zip Code 53593-1754

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

Name of Employer WISCONSIN HOSPITAL ASSOCIATION Occupation CEO

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 10 / 2020

Transaction ID : SA11A.21211

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION
POSTMARKED 10/30/2020

B. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
321010.82

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 27 / 2020

Transaction ID : SA11C.21216

Amount of Each Receipt this Period
256.13

Memo Item
CONTRIBUTION
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

Mailing Address 1484 BLUE HERON DRIVE

City CRYSTAL LAKE State IL Zip Code 60014-1970

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
301.35

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 24 / 2020

Transaction ID : SA11A.21242

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION
EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 26
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mike Gallagher for Wisconsin

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
321010.82

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2020

Transaction ID : SA11C.21219

Amount of Each Receipt this Period
2790.15

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B. Full Name (Last, First, Middle Initial)
DENNING, EUNICE, , ,

Mailing Address 1014 SYCAMORE AVENUE

City RACINE State WI Zip Code 53406-4137

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
340.40

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2020

Transaction ID : SA11A.21312

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

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

Mailing Address 1018 STERLING AVE

City NEENAH State WI Zip Code 54956-3134

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
424.25

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 27 / 2020

Transaction ID : SA11A.21311

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00

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

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

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

FOR LINE NUMBER: PAGE 9 OF 26
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mike Gallagher for Wisconsin

A. Full Name (Last, First, Middle Initial)
PELTON, MARY, , MS.,

Mailing Address 4360 HILTON HEAD COURT

City ONEIDA State WI Zip Code 54155-8640

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

Name of Employer CUNA MUTUAL GROUP Occupation PROCUREMENT

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **683.32**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2020

Transaction ID : SA11A.21309

Amount of Each Receipt this Period
 16.66

Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

B. Full Name (Last, First, Middle Initial)
SANKAR, SHYAM, , ,

Mailing Address 710 DELANO STREET

City HOUSTON State TX Zip Code 77003-3213

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

Name of Employer PALANTIR TECHNOLOGIES Occupation COO

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **5600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2020

Transaction ID : SA11A.21315

Amount of Each Receipt this Period
 2600.00

Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

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

Mailing Address 106 SPECTACLE LN

City WILTON State CT Zip Code 06897-1115

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

Name of Employer SELF EMPLOYED Occupation CONSULTANT

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **716.66**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2020

Transaction ID : SA11A.21314

Amount of Each Receipt this Period
 33.33

Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ **2649.99**

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

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

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

FOR LINE NUMBER: PAGE 10 OF 26
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mike Gallagher for Wisconsin

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 321010.82

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 10 / 2020

Transaction ID : SA11C.21221

Amount of Each Receipt this Period
 116.28

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B. Full Name (Last, First, Middle Initial)
ANDERSON, CHARIDY, , ,

Mailing Address 1834 SAHARA CT

City GREEN BAY State WI Zip Code 54304-3070

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 419.68

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2020

Transaction ID : SA11A.21334

Amount of Each Receipt this Period
 3.33

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

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

Mailing Address 1484 BLUE HERON DRIVE

City CRYSTAL LAKE State IL Zip Code 60014-1970

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 301.35

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2020

Transaction ID : SA11A.21324

Amount of Each Receipt this Period
 25.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 28.33

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

**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 26
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Mike Gallagher for Wisconsin

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
321010.82

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2020

Transaction ID : SA11C.21436

Amount of Each Receipt this Period
223.63

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B. Full Name (Last, First, Middle Initial)
LENZ, SUSAN, , ,

Mailing Address 1018 STERLING AVE

City NEENAH State WI Zip Code 54956-3134

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
424.25

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 27 / 2020

Transaction ID : SA11A.21459

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

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

Mailing Address 6398 AVALON POINTE CT

City BOCA RATON State FL Zip Code 33496-4007

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

Name of Employer Occupation
NEXTGEN MANAGEMENT LLC ENGINEER

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.02

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 30 / 2020

Transaction ID : SA11A.21460

Amount of Each Receipt this Period
83.34

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 103.34

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

**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 26
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Mike Gallagher for Wisconsin

A. Full Name (Last, First, Middle Initial)
STAHL, LEWIS, , ,

Mailing Address 6398 AVALON POINTE CT

City BOCA RATON State FL Zip Code 33496-4007

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

Name of Employer NEXTGEN MANAGEMENT LLC Occupation ENGINEER

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , , 250.02

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2020

Transaction ID : SA11A.21461

Amount of Each Receipt this Period
 , , , 83.34

Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

B. 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

Memo Item

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

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	83.34
TOTAL This Period (last page this line number only)..... ▶	3837.70

**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 26	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Mike Gallagher for Wisconsin

A. Full Name (Last, First, Middle Initial)
DENHAM FOR CONGRESS

Mailing Address 9458 TREELAKE RD.

City GRANITE BAY	State CA	Zip Code 95746-6618
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00473272

Name of Employer	Occupation
------------------	------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2020

Transaction ID : SA11C.21213

Amount of Each Receipt this Period
 _____ 500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RYAN FOR CONGRESS, INC.

Mailing Address PO BOX 1488

City JANESVILLE	State WI	Zip Code 53547-1488
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00330894

Name of Employer	Occupation
------------------	------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 22 / 2020

Transaction ID : SA11C.21549

Amount of Each Receipt this Period
 _____ 2000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RYAN FOR CONGRESS, INC.

Mailing Address PO BOX 1488

City JANESVILLE	State WI	Zip Code 53547-1488
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00330894

Name of Employer	Occupation
------------------	------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 22 / 2020

Transaction ID : SA11C.21550

Amount of Each Receipt this Period
 _____ 2000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 4500.00
TOTAL This Period (last page this line number only)..... ▶	_____

**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 26	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Mike Gallagher for Wisconsin

A. Full Name (Last, First, Middle Initial)
MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITICAL ACTION

Mailing Address 1295 STATE STREET

City SPRINGFIELD	State MA	Zip Code 01111-0001
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00118943

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 10 / 2020

Transaction ID : SA11C.21202

Amount of Each Receipt this Period
3500.00

Memo Item
CONTRIBUTION
POSTMARKED 11/2/2020

B. Full Name (Last, First, Middle Initial)
PROSPERITY ACTION INC.

Mailing Address 320 1ST STREET SE

City WASHINGTON	State DC	Zip Code 20003-1838
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00377689

Name of Employer	Occupation
------------------	------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
12000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 10 / 2020

Transaction ID : SA11C.21197

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

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

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	8500.00
TOTAL This Period (last page this line number only)..... ▶	13000.00

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

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

FOR LINE NUMBER: PAGE 15 OF 26
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mike Gallagher for Wisconsin

A. Full Name (Last, First, Middle Initial)
NICOLET NATIONAL BANK

Mailing Address 111 N. WASHINGTON ST

City GREEN BAY State WI Zip Code 54301

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
21406.54

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2020

Transaction ID : SA15.4868

Amount of Each Receipt this Period
 8.22

Memo Item
INTEREST INCOME

B. 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

Memo Item

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

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	8.22
TOTAL This Period (last page this line number only).....▶	8.22

**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 16 OF 26	
	<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)
Mike Gallagher for Wisconsin

Full Name (Last, First, Middle Initial) A. ALT, STAN , , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2020	
Mailing Address N2211 COUNTY ROAD J			FEC Identification Number C	
City KAUKAUNA	State WI	Zip Code 54130	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement FIELD CONSULTING		Category/ Type	Transaction ID : SB17.I4861	
Candidate Name		<input type="checkbox"/> 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. ANDREAE, TAYLOR , , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2020	
Mailing Address 324 KENTUCKY AVE SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 520.37	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type	Transaction ID : SB17.I4863	
Candidate Name		<input type="checkbox"/> 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. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2020	
Mailing Address 300 FIRST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 242.72	
Purpose of Disbursement CATERING EXPENSE		Category/ Type	Transaction ID : SB17.I4883	
Candidate Name		<input checked="" type="checkbox"/> 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:				

SUBTOTAL of Disbursements This Page (optional).....▶	5520.37
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 17 OF 26	
	<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)
Mike Gallagher for Wisconsin

Full Name (Last, First, Middle Initial) A. THE BRIG		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2020
Mailing Address 1007 8TH ST SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement MEETING EXPENSE		Amount of Each Disbursement this Period 277.65
Candidate Name		Transaction ID : SB17.I4882
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. MCNULTY, PATRICK, T, ,		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2020
Mailing Address 3040 N 77TH STREET		FEC Identification Number C
City MILWAUKEE	State WI	Zip Code 53222
Purpose of Disbursement SEE MEMO ENTRIES		Amount of Each Disbursement this Period 5393.93
Candidate Name		Transaction ID : SB17.I4859
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. MCNULTY, PATRICK, T, ,		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2020
Mailing Address 3040 N 77TH STREET		FEC Identification Number C
City MILWAUKEE	State WI	Zip Code 53222
Purpose of Disbursement STRATEGY CONSULTING		Amount of Each Disbursement this Period 5000.00
Candidate Name		Transaction ID : SB17.I4896
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	5393.93
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 18 OF 26	
	<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)
Mike Gallagher for Wisconsin

Full Name (Last, First, Middle Initial) A. MCNULTY, PATRICK, T, ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2020	
Mailing Address 3040 N 77TH STREET			FEC Identification Number C	
City MILWAUKEE	State WI	Zip Code 53222	Amount of Each Disbursement this Period 393.93	
Purpose of Disbursement MILEAGE REIMBURSEMENT		Category/ Type	Transaction ID : SB17.I4897	
Candidate Name		<input checked="" type="checkbox"/> 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. AT EASE ADVISORS, LLC			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2020	
Mailing Address 2024 EASTWOOD AVE			FEC Identification Number C	
City JANESVILLE	State WI	Zip Code 53545	Amount of Each Disbursement this Period 29150.00	
Purpose of Disbursement CAMPAIGN MANAGEMENT		Category/ Type	Transaction ID : SB17.I4855	
Candidate Name		<input type="checkbox"/> 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. CMDI			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2020	
Mailing Address 1593 SPRING HILL RD #400			FEC Identification Number C	
City VIENNA	State VA	Zip Code 22182	Amount of Each Disbursement this Period 1600.00	
Purpose of Disbursement SOFTWARE		Category/ Type	Transaction ID : SB17.I4856	
Candidate Name		<input type="checkbox"/> 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:				

SUBTOTAL of Disbursements This Page (optional).....▶	30750.00
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 19 OF 26	
	<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)
Mike Gallagher for Wisconsin

Full Name (Last, First, Middle Initial) A. CMDI		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2020
Mailing Address 1593 SPRING HILL RD #400		FEC Identification Number C
City VIENNA	State VA	Zip Code 22182
Purpose of Disbursement SOFTWARE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1600.00	
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) ▼	Transaction ID : SB17.I4876
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. IMGE, LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2020
Mailing Address 108 SOUTH WASHINGTON ST 3RD FLOOR		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement DIGITAL CONSULTING	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 3680.00	
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) ▼	Transaction ID : SB17.I4858
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. NICOLET NATIONAL BANK CARD SERVICES		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2020
Mailing Address PO BOX 84006		FEC Identification Number C
City COLUMBUS	State GA	Zip Code 31908
Purpose of Disbursement SEE MEMO ENTRIES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 13678.46	
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) ▼	Transaction ID : SB17.I4869
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	18958.46
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 20 OF 26	
	<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)
Mike Gallagher for Wisconsin

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2020
Mailing Address 300 FIRST ST SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement CATERING EXPENSE		Amount of Each Disbursement this Period 213.53
Candidate Name		Transaction ID : SB17.I4884
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2020
Mailing Address 942 SOUTH SHADY GROVE RD		FEC Identification Number C
City MEMPHIS	State TN	Zip Code 38119
Purpose of Disbursement SHIPPING		Amount of Each Disbursement this Period 98.76
Candidate Name		Transaction ID : SB17.I4887
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. GALLAGHER'S PIZZA		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2020
Mailing Address 1927 S WEBSTER AVE		FEC Identification Number C
City GREEN BAY	State WI	Zip Code 54301
Purpose of Disbursement MEETING EXPENSE		Amount of Each Disbursement this Period 158.84
Candidate Name		Transaction ID : SB17.I4888
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) ▼	<input checked="" type="checkbox"/> Memo 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 21 OF 26	
	<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)
Mike Gallagher for Wisconsin

Full Name (Last, First, Middle Initial) A. GOOGLE		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2020
Mailing Address 1600 AMPHITHEATRE PARKWAY		FEC Identification Number C
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement ADVERTISING	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 48.00	
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) ▼	Transaction ID : SB17.I4889
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. KUMMERS STORAGE		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2020
Mailing Address 1808 ALLOUEZ AVE		FEC Identification Number C
City GREEN BAY	State WI	Zip Code 54311
Purpose of Disbursement STORAGE UNIT RENTAL	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 85.00	
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) ▼	Transaction ID : SB17.I4890
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. KWIK TRIP		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2020
Mailing Address 1626 OAK STREET P.O. BOX 2107		FEC Identification Number C
City LA CROSSE	State WI	Zip Code 54602
Purpose of Disbursement TRAVEL EXPENSE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 66.06	
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) ▼	Transaction ID : SB17.I4891
State: District:	<input checked="" type="checkbox"/> Memo Item	

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 22 OF 26	
	<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)
Mike Gallagher for Wisconsin

Full Name (Last, First, Middle Initial) A. REPUBLICAN PARTY OF BROWN COUNTY			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2020	
Mailing Address PO BOX 5202			FEC Identification Number C	
City DE PERE	State WI	Zip Code 54114	Amount of Each Disbursement this Period 250.00	
Purpose of Disbursement MEMBERSHIP DUES		Category/Type	Transaction ID : SB17.I4895	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. ROCK GARDEN SUPER CLUB			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2020	
Mailing Address 1951 BOND ST			FEC Identification Number C	
City GREEN BAY	State WI	Zip Code 54303	Amount of Each Disbursement this Period 371.38	
Purpose of Disbursement CATERING EXPENSE		Category/Type	Transaction ID : SB17.I4892	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. STEINERT PRINTING			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2020	
Mailing Address 1465 S WASHBURN ST			FEC Identification Number C	
City OSHKOSH	State WI	Zip Code 54904	Amount of Each Disbursement this Period 10620.70	
Purpose of Disbursement PRINTING		Category/Type	Transaction ID : SB17.I4894	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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).....▶	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 23 OF 26	
	<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)
Mike Gallagher for Wisconsin

Full Name (Last, First, Middle Initial) A. THE RUNAWAY SPOON		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2020
Mailing Address 129 N BROADWAY ST		FEC Identification Number C
City DE PERE	State WI	Zip Code 54115
Purpose of Disbursement CATERING EXPENSE		Amount of Each Disbursement this Period 1487.55
Candidate Name		Transaction ID : SB17.I4893
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. PROFESSIONAL DATA SERVICES		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2020
Mailing Address 824 S. MILLEDGE AVE STE 101		FEC Identification Number C
City ATHENS	State GA	Zip Code 30605
Purpose of Disbursement COMPLIANCE CONSULTING		Amount of Each Disbursement this Period 2618.88
Candidate Name		Transaction ID : SB17.I4860
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) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. PROFESSIONAL DATA SERVICES		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2020
Mailing Address 824 S. MILLEDGE AVE STE 101		FEC Identification Number C
City ATHENS	State GA	Zip Code 30605
Purpose of Disbursement COMPLIANCE CONSULTING		Amount of Each Disbursement this Period 2524.50
Candidate Name		Transaction ID : SB17.I4870
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) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	5143.38
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 24 OF 26	
	<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)
Mike Gallagher for Wisconsin

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2020
Mailing Address 510 TOWNSEND ST		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement CC TRANSACTION FEE		Amount of Each Disbursement this Period 25.62
Candidate Name		Transaction ID : SB17.I4862
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. WINRED		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CC TRANSACTION FEE		Amount of Each Disbursement this Period 425.27
Candidate Name		Transaction ID : SB17.I4864
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. WINRED		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CC TRANSACTION FEE		Amount of Each Disbursement this Period 15.32
Candidate Name		Transaction ID : SB17.I4865
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	466.21
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 25 OF 26			
	<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)
Mike Gallagher for Wisconsin

Full Name (Last, First, Middle Initial) A. WINRED			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2020		
Mailing Address PO BOX 9891			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 40.01		
Purpose of Disbursement CC TRANSACTION FEE		Category/Type	Transaction ID : SB17.I4875		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item		
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	40.01
TOTAL This Period (last page this line number only).....▶	66272.36

**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 26 OF 26			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Mike Gallagher for Wisconsin

Full Name (Last, First, Middle Initial) A. APPLBAUM, CHRISTIE, LEE, ,			Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2020		
Mailing Address MELCHETT 30 FL 6 APT 53					
City TEL AVIV	State AE	Zip Code 65234	FEC Identification Number C		
Purpose of Disbursement REFUND			Amount of Each Disbursement this Period 2800.00		
Candidate Name			Transaction ID : SB20A.I4879		
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) B. LUCKEY, PALMER, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2020		
Mailing Address 940 VIA LIDO NORD					
City NEWPORT BEACH	State CA	Zip Code 92663	FEC Identification Number C		
Purpose of Disbursement REFUND			Amount of Each Disbursement this Period 2800.00		
Candidate Name			Transaction ID : SB20A.I4881		
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) C. MOELLER , JAMES, , ,			Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2020		
Mailing Address 6265 WOODLAND DR					
City WAUNAKEE	State WI	Zip Code 53597	FEC Identification Number C		
Purpose of Disbursement REFUND			Amount of Each Disbursement this Period 5400.00		
Candidate Name			Transaction ID : SB20A.I4880		
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item		
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....▶	11000.00
TOTAL This Period (last page this line number only).....▶	11000.00