

FEC FORM 3P **REPORT OF RECEIPTS AND DISBURSEMENTS**
 BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

Office Use Only

1. NAME OF COMMITTEE (in full, type or print) Example: If typing, type over the lines. 12FE4M5

SCOTT WALKER INC

ADDRESS (number and street) PO BOX 620590

Check if different than previously reported. (ACC)

MIDDLETON WI 53562 CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C C00580480 3. THIS REPORT IS FOR Primary or General

4. TYPE OF REPORT (Choose One) Check here if this is a Termination Report (TER)

Quarterly Reports:

Monthly Reports:

- April 15 (Q1) October 15 (Q3) Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11)
July 15 (Q2) January 31 Year-End Report (YE) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12)
Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

Thirtieth day report following the General Election on Twelfth day report preceding election on in the State of

Is this Report an Amendment? yes no

5. Covering Period 05 / 01 / 2016 through 05 / 31 / 2016

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 KATE LIND

Signature of Treasurer KATE LIND [Electronically Filed] Date 06 / 20 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of this form are obsolete and should no longer be used.

Table with 10 columns, first column labeled 'Office Use Only'

Write or Type Committee Name

SCOTT WALKER INC

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

SUMMARY

6. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	<input type="text" value="16789.32"/>
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 3)	<input type="text" value="127236.53"/>
8. SUBTOTAL (Lines 6 and 7)	<input type="text" value="144025.85"/>
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	<input type="text" value="115120.19"/>
10. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 9 from 8.....)	<input type="text" value="28905.66"/>
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="0.00"/>
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="807675.95"/>
13. EXPENDITURES SUBJECT TO LIMITATION	<input type="text" value="112609.83"/>

NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES

14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2)	<input type="text" value="7780427.65"/>
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2).....	<input type="text" value="7989659.34"/>

DETAILED SUMMARY PAGE

FEC Form 3P (Rev. 03/2011)

of Receipts

NAME OF COMMITTEE (in Full)

SCOTT WALKER INC

Report Covering the Period: From:

MM / DD / YYYY
05 / 01 / 2016

To:

MM / DD / YYYY
05 / 31 / 2016

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) itemized	52431.00	5275432.54
(ii) unitemized	37664.25	2899253.11
(iii) Total contributions	90095.25	8174685.65
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	5000.00	53100.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d))	95095.25	8227785.65
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate	0.00	0.00
(b) Other Loans	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	0.00	0.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):		
(a) Operating	1110.36	64726.19
(b) Fundraising	0.00	0.00
(c) Legal and Accounting	0.00	0.00
(d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c))	1110.36	64726.19
21. OTHER RECEIPTS (Dividends, Interest, etc.)	31030.92	238137.35
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21)	127236.53	8530649.19

DETAILED SUMMARY PAGE

FEC Form 3P (Rev. 03/2011)

of Disbursements and Contributed Items

NAME OF COMMITTEE (in Full)

SCOTT WALKER INC

Report Covering the Period: From:

M M / D D / Y Y Y Y
05 / 01 / 2016

To:

M M / D D / Y Y Y Y
05 / 31 / 2016

II. DISBURSEMENTS

**COLUMN A
Total This Period**

**COLUMN B
Calendar Year-to-Date**

23. OPERATING EXPENDITURES.....	113720.19	8054385.53
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS.....	0.00	0.00
27. LOAN REPAYMENTS MADE:		
(a) Repayments of Loans made or Guaranteed by Candidate.....	0.00	0.00
(b) Other Repayments	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)).....	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	1400.00	442358.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees	0.00	5000.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c))	1400.00	447358.00
29. OTHER DISBURSEMENTS	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	115120.19	8501743.53

**III. CONTRIBUTED ITEMS
(Stock, Art Objects, Etc.)**

31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	0.00	
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FEC FORM 3P,
Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

**ALLOCATION OF PRIMARY EXPENDITURES
BY STATE FOR
A PRESIDENTIAL CANDIDATE**
(Used Only by Primary Committees Receiving
or Expecting To Receive Federal Funds)

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

2. FEC IDENTIFICATION NUMBER

C C00580480

SCOTT WALKER INC

ADDRESS (number and street) PO BOX 620590

MIDDLETON

CITY

WI

STATE

53562

ZIP CODE

3. NAME OF CANDIDATE

ALLOCATION BY STATE

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Alabama	0.00	0.00
Alaska	0.00	0.00
Arizona	0.00	0.00
Arkansas	0.00	0.00
California	0.00	0.00
Colorado	0.00	0.00
Connecticut	0.00	0.00
Delaware	0.00	0.00
District of Columbia	0.00	0.00
Florida	0.00	0.00
Georgia	0.00	0.00
Hawaii	0.00	0.00
Idaho	0.00	0.00
Illinois	0.00	0.00

<i>STATE</i>	<i>ALLOCATION This Period</i>	<i>TOTAL ALLOCATION To Date</i>
Indiana	0.00	0.00
Iowa	0.00	0.00
Kansas	0.00	0.00
Kentucky	0.00	0.00
Louisiana	0.00	0.00
Maine	0.00	0.00
Maryland	0.00	0.00
Massachusetts	0.00	0.00
Michigan	0.00	0.00
Minnesota	0.00	0.00
Mississippi	0.00	0.00
Missouri	0.00	0.00
Montana	0.00	0.00
Nebraska	0.00	0.00
Nevada	0.00	0.00
New Hampshire	0.00	0.00
New Jersey	0.00	0.00
New Mexico	0.00	0.00
New York	0.00	0.00
North Carolina	0.00	0.00
North Dakota	0.00	0.00
Ohio	0.00	0.00
Oklahoma	0.00	0.00
Oregon	0.00	0.00
Pennsylvania	0.00	0.00

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Rhode Island	0.00	0.00
South Carolina	0.00	0.00
South Dakota	0.00	0.00
Tennessee	0.00	0.00
Texas	0.00	0.00
Utah	0.00	0.00
Vermont	0.00	0.00
Virginia	0.00	0.00
Washington	0.00	0.00
West Virginia	0.00	0.00
Wisconsin	0.00	0.00
Wyoming	0.00	0.00
Puerto Rico	0.00	0.00
Guam	0.00	0.00
Virgin Islands	0.00	0.00
TOTALS	0.00	0.00

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
JOANNE M AARSETH

Mailing Address 20840 MIRANDA FALLS SQ

City	State	Zip Code
STERLING	VA	20165

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

Name of Employer	Occupation
FREDDIE MAC	LAWYER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 325.00

Transaction ID : SA17A.144557

Date of Receipt

M M / D D / Y Y Y Y
05 / 20 / 2016

Amount of Each Receipt this Period

_____ 75.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JOHN ADAMS

Mailing Address 312 FOREST DR SE

City	State	Zip Code
CEDAR RAPIDS	IA	52403

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 266.00

Transaction ID : SA17A.144622

Date of Receipt

M M / D D / Y Y Y Y
05 / 10 / 2016

Amount of Each Receipt this Period

_____ 56.00

Memo Item

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

Mailing Address 2284 KARENDALE CIRCLE

City	State	Zip Code
RIVERSIDE	CA	92506

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

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 600.00

Transaction ID : SA17A.144979

Date of Receipt

M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Receipt this Period

_____ 200.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ _____ 331.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) DAVID ANDERSON		Transaction ID : SA17A.145388
Mailing Address 18169 ANDERSON STREET		Date of Receipt M M / D D / Y Y Y Y 05 / 24 / 2016
City WHITEHALL	State WI	Zip Code 54773
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 40.00
Name of Employer OSSEO FORD	Occupation FINANCE MANAGER	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 340.00	

B. Full Name (Last, First, Middle Initial) FRED ANTHONY		Transaction ID : SA17A.145213
Mailing Address PO BOX 1055		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2016
City ROSWELL	State GA	Zip Code 30077
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 50.00
Name of Employer SELF-EMPLOYED	Occupation REAL ESTATE	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

C. Full Name (Last, First, Middle Initial) AVON BABB		Transaction ID : SA17A.144681
Mailing Address 621 SPYGLASS DRIVE		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2016
City EUGENE	State OR	Zip Code 97401
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 500.00
Name of Employer RETIRED	Occupation RETIRED	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Subtotal Of Receipts This Page (optional).....▶ 590.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
MONA BAILEY

Mailing Address 6200 LAKE WAY

City State Zip Code
NORTH RICHLAN TX 76180

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144167

Date of Receipt
M M / D D / Y Y Y Y
05 / 10 / 2016

SEE REATTRIBUTION

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
MONA BAILEY

Mailing Address 6200 LAKE WAY

City State Zip Code
NORTH RICHLAN TX 76180

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144167.0

Date of Receipt
M M / D D / Y Y Y Y
05 / 10 / 2016

REATTRIBUTION TO SPOUSE

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 6200 LAKE WAY

City State Zip Code
NORTH RICHLAN TX 76180

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144167.1

Date of Receipt
M M / D D / Y Y Y Y
05 / 10 / 2016

REATTRIBUTION FROM SPOUSE

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 11 / 95

(check only one)
 16 17a 17b 17c 17d 18
 19a 19b 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) NANCY BARNHART			Transaction ID : SA17A.145009 Date of Receipt MM / DD / YYYY 05 / 23 / 2016	
Mailing Address 7370 WALSH RD			Amount of Each Receipt this Period _____ 150.00 <input type="checkbox"/> Memo Item	
City	State	Zip Code		
MILLINGTON	TN	38053		
FEC ID number of contributing federal political committee. C _____				
Name of Employer	Occupation		Amount of Each Receipt this Period _____ 550.00 <input type="checkbox"/> Memo Item	
RETIRED	RETIRED			
Receipt For: 2016	Election Cycle-to-Date ▼			
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	_____ 550.00			

B. Full Name (Last, First, Middle Initial) PATRICIA BARTLOW			Transaction ID : SA17A.144405 Date of Receipt MM / DD / YYYY 05 / 26 / 2016	
Mailing Address 8886 DEER SKY RANCH TRAIL			Amount of Each Receipt this Period _____ 200.00 <input type="checkbox"/> Memo Item	
City	State	Zip Code		
NAMPA	ID	83686		
FEC ID number of contributing federal political committee. C _____				
Name of Employer	Occupation		Amount of Each Receipt this Period _____ 300.00 <input type="checkbox"/> Memo Item	
RETIRED	RETIRED			
Receipt For: 2016	Election Cycle-to-Date ▼			
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	_____ 300.00			

C. Full Name (Last, First, Middle Initial) JAMES BARTON			Transaction ID : SA17A.144551 Date of Receipt MM / DD / YYYY 05 / 20 / 2016	
Mailing Address 417 W LAWNSDALE AVENUE			Amount of Each Receipt this Period _____ 250.00 <input type="checkbox"/> Memo Item	
City	State	Zip Code		
PEORIA	IL	61604		
FEC ID number of contributing federal political committee. C _____				
Name of Employer	Occupation		Amount of Each Receipt this Period _____ 500.00 <input type="checkbox"/> Memo Item	
RETIRED	RETIRED			
Receipt For: 2016	Election Cycle-to-Date ▼			
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	_____ 500.00			

Subtotal Of Receipts This Page (optional).....▶ _____ 600.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
MR. WARREN BATTS

Mailing Address 219 E LAKE SHORE DRIVE, APT 11CD

City	State	Zip Code
CHICAGO	IL	60611

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144992

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			25			2016			

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
JAMES M BECK

Mailing Address 312 FAIRWAY DR

City	State	Zip Code
COLUMBUS	WI	53925

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
DRS. BECK & BECK	DENTIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144850

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			19			2016			

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
SANDRA S BENNETT

Mailing Address P. O. BOX 409

City	State	Zip Code
LA CENTER	WA	98629

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.145386

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			24			2016			

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
JAMES A BEVINGTON

Mailing Address 2147 CAMINO LAUREL

City	State	Zip Code
SAN CLEMENTE	CA	92673

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 600.00

Transaction ID : SA17A.145235

Date of Receipt

M M / D D / Y Y Y Y
05 / 24 / 2016

Amount of Each Receipt this Period

_____ 300.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ALLEN M BIEVER

Mailing Address 147 E BEUTEL RD

City	State	Zip Code
PORT WASHINGT	WI	53074

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1650.00

Transaction ID : SA17A.144974

Date of Receipt

M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Receipt this Period

_____ 100.00

Memo Item

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

Mailing Address 435 N MAIN STREET

City	State	Zip Code
SEYMOUR	WI	54165

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

Name of Employer	Occupation
BAY SHIP BUILDING	SHIP BUILDER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 210.00

Transaction ID : SA17A.145444

Date of Receipt

M M / D D / Y Y Y Y
05 / 20 / 2016

Amount of Each Receipt this Period

_____ 100.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ _____ 500.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
STEPHEN BROTMAN

Mailing Address **630 PARK AVE**

City **NEW YORK** State **NY** Zip Code **10065**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.144190

Date of Receipt
M M / D D / Y Y Y Y
05 / 10 / 2016

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ELIZABETH C BRUNETTE

Mailing Address **49557 CABBAGE SCHOOL ROAD**

City **PENDLETON** State **OR** Zip Code **97801**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.145212

Date of Receipt
M M / D D / Y Y Y Y
05 / 31 / 2016

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
PETER R CARNEY

Mailing Address **10 S RIVERSIDE PLAZA
SUITE 1470**

City **CHICAGO** State **IL** Zip Code **60606**

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

Name of Employer **SUPERIOR GRAPHITE COMPANY** Occupation **CHAIRMAN**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.145417

Date of Receipt
M M / D D / Y Y Y Y
05 / 20 / 2016

Amount of Each Receipt this Period
100.00

Memo Item

Subtotal Of Receipts This Page (optional)..... **450.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) CAROL A CASADONTE Mailing Address 326 WOODFORD DRIVE City WEST BEND State WI Zip Code 53090 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer RETIRED Occupation RETIRED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="450.00"/>		Transaction ID : SA17A.144654 Date of Receipt M M / D D / Y Y Y Y 05 / 27 / 2016 Amount of Each Receipt this Period <input type="text" value="100.00"/> <input type="checkbox"/> Memo Item
---	--	---

B. Full Name (Last, First, Middle Initial) W. CASANOVA Mailing Address 8736 PEPPER AVE City ROME State NY Zip Code 13440 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer RETIRED Occupation RETIRED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="300.00"/>		Transaction ID : SA17A.144449 Date of Receipt M M / D D / Y Y Y Y 05 / 20 / 2016 Amount of Each Receipt this Period <input type="text" value="100.00"/> <input type="checkbox"/> Memo Item
---	--	---

C. Full Name (Last, First, Middle Initial) ANTHONY CHICONAS Mailing Address W249S7450 CENTER ROAD City WAUKESHA State WI Zip Code 53189 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer SOF TOUCH PACKAGING Occupation GENERAL MANAGER Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="302.00"/>		Transaction ID : SA17A.144525 Date of Receipt M M / D D / Y Y Y Y 05 / 27 / 2016 Amount of Each Receipt this Period <input type="text" value="100.00"/> <input type="checkbox"/> Memo Item
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Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
PETER CLARK

Mailing Address **302 E WILLIAM STREET**

City **BATH** State **NY** Zip Code **14810**

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

Name of Employer **UTICA NATIONAL INSURANCE GROUP** Occupation **DIRECTOR OF HUMAN RESOURCES**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.145118

Date of Receipt

05 / **17** / **2016**

Amount of Each Receipt this Period

100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
KENNETH COOK

Mailing Address **2306 W DICKINSON CT**

City **MEQUON** State **WI** Zip Code **53092**

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

Name of Employer **KEN COOK COMPANY** Occupation **PRESIDENT/CEO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.145019

Date of Receipt

05 / **23** / **2016**

Amount of Each Receipt this Period

100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JOHN W COYLE

Mailing Address **P.O. BOX 510715**

City **MELBOURNE BEA** State **FL** Zip Code **32951**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17A.144649

Date of Receipt

05 / **23** / **2016**

Amount of Each Receipt this Period

200.00

Memo Item

Subtotal Of Receipts This Page (optional)..... **400.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
JAMES CRAW

Mailing Address 3038 RIVER RD

City State Zip Code
DECORAH IA 52101

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

Name of Employer Occupation
SELF-EMPLOYED TAX ACCOUNTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.145257

Date of Receipt

/ /

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
THOMAS DAL SIN

Mailing Address 1603 NORTHWOOD RD NW

City State Zip Code
PRIOR LAKE MN 55372

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

Name of Employer Occupation
EBSO, INC. ACCOUNTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.144176

Date of Receipt

/ /

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 604 S. WALNUT STREET

City State Zip Code
MOUNT PLEASANT IA 52641

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

Name of Employer Occupation
SELF-EMPLOYED RESTAURANT OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.145004

Date of Receipt

/ /

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

SCHEDULE A-P
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
GORDON DEBRUIN

Mailing Address **PO BOX 303**

City	State	Zip Code
CARTER	OK	73627

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.145015

Date of Receipt

M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Receipt this Period

50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HENRY DEITERS

Mailing Address **18 TARTAN LAKES COURT**

City	State	Zip Code
WESTMONT	IL	60559

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 450.00

Transaction ID : SA17A.144222

Date of Receipt

M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Receipt this Period

300.00

Memo Item

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

Mailing Address **13009 MACLAY STREET**

City	State	Zip Code
SYLMAR	CA	91342

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 400.00

Transaction ID : SA17A.145352

Date of Receipt

M M / D D / Y Y Y Y
05 / 20 / 2016

Amount of Each Receipt this Period

200.00

Memo Item

Subtotal Of Receipts This Page (optional)..... **550.00**

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
JOHN H DIXON

Mailing Address 11301 BRIDGEPORT PL

City	State	Zip Code
BELVIDERE	IL	61008

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 350.00

Transaction ID : SA17A.145286

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	1	6

Amount of Each Receipt this Period

_____	100.00
-------	--------

Memo Item

B. Full Name (Last, First, Middle Initial)
JAMES DROHAN

Mailing Address P. O. BOX 277

City	State	Zip Code
MOUNT JOY	PA	17552

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

Name of Employer	Occupation
DROHAN BRICK & SUPPLY, INC.	COMPANY PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.144760

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	1	6

Amount of Each Receipt this Period

_____	50.00
-------	-------

Memo Item

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

Mailing Address 467 FARRAR DRIVE

City	State	Zip Code
CAPE GIRARDEA	MO	63701

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 350.00

Transaction ID : SA17A.144368

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	1	6

Amount of Each Receipt this Period

_____	100.00
-------	--------

Memo Item

Subtotal Of Receipts This Page (optional).....▶

_____	250.00
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Total This Period (last page this line number only).....▶

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SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
ROBERT DUDLEY

Mailing Address **3365 W TELEGRAPH ROAD**

City	State	Zip Code
FILLMORE	CA	93015

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

Name of Employer	Occupation
SELF-EMPLOYED	FARMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2015 2016 2017 2018 2019 2020 2021 2022 2023 2024 2025 2026 2027 2028 2029 2030

300.00

Transaction ID : SA17A.144687

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	4		2	0	1	6

Amount of Each Receipt this Period

50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WILLIAM T DUFFY

Mailing Address **20637 LEONARD RD**

City	State	Zip Code
SARATOGA	CA	95070

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2015 2016 2017 2018 2019 2020 2021 2022 2023 2024 2025 2026 2027 2028 2029 2030

300.00

Transaction ID : SA17A.145223

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	1	6

Amount of Each Receipt this Period

100.00

Memo Item

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

Mailing Address **7066 NORWAY RD**

City	State	Zip Code
SUN PRAIRIE	WI	53590

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2015 2016 2017 2018 2019 2020 2021 2022 2023 2024 2025 2026 2027 2028 2029 2030

600.00

Transaction ID : SA17A.144605

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	7		2	0	1	6

Amount of Each Receipt this Period

150.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶

300.00

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

300.00

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 21 / 95

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
STEPHEN DVORCHAK

Mailing Address **2559 MOONLIGHT VALLEY AVE.**

City State Zip Code
HENDERSON NV 89044

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

Name of Employer Occupation
USAF OPERATIONS RESEARCH ANALYST

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.144481

Date of Receipt
M M / D D / Y Y Y Y
05 27 2016

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WILLIAM EATON

Mailing Address **13 CALA D OR**

City State Zip Code
LAGUNA NIGUEL CA 92677

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.145296

Date of Receipt
M M / D D / Y Y Y Y
05 23 2016

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address **1555 LYON DRIVE, APT 314**

City State Zip Code
NEENAH WI 54956

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

Name of Employer Occupation
AMERICAN PAPER CONVERTERS, INC CORP EXEC

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.144350

Date of Receipt
M M / D D / Y Y Y Y
05 19 2016

Amount of Each Receipt this Period
500.00

Memo Item

Subtotal Of Receipts This Page (optional)..... **700.00**

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
DAVID B FALSTAD

Mailing Address 4600 W DEER PARK ROAD

City	State	Zip Code
OCONOMOWO	WI	53066

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
STATE OF WI	COMMISSIONER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144218

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			16			2016			

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
DWIGHT FAWCETT

Mailing Address 425 DAVIS STREET
UNIT 406

City	State	Zip Code
EVANSTON	IL	60201

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.145469

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			23			2016			

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
KAY P FINLAY

Mailing Address 10 LA CERRA CIR

City	State	Zip Code
RANCHO MIRAGE	CA	92270

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144286

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			23			2016			

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
E. FLOURNOY

Mailing Address 508 GREENWOOD DRIVE

City	State	Zip Code
ALBANY	GA	31707

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2015 2016 2017

Transaction ID : SA17A.144224

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			23			2016			

Amount of Each Receipt this Period
 0.00 100.00 200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MR. MARK FORSYTHE

Mailing Address 35352 FORST RD

City	State	Zip Code
PRAIRIE DU CHIEN	WI	53821

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

Name of Employer	Occupation
PEOPLE'S STATE BANK	PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2015 2016 2017

Transaction ID : SA17A.144210

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			12			2016			

Amount of Each Receipt this Period
 0.00 2700.00 5400.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ROBERT T GALKIN

Mailing Address 110 ELSIE STREET

City	State	Zip Code
CRANSTON	RI	02910

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

Name of Employer	Occupation
NATCO PRODUCTS	CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2015 2016 2017

Transaction ID : SA17A.144981

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			23			2016			

Amount of Each Receipt this Period
 0.00 100.00 200.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ 2900.00

Total This Period (last page this line number only).....▶ 2900.00

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
PAMELA GALLOWAY

Mailing Address 3496 S STATE ROAD 15

City	State	Zip Code
WARSAW	IN	46580

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144233

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	1	6

Amount of Each Receipt this Period

<input type="text" value="2700.00"/>

Memo Item

B. Full Name (Last, First, Middle Initial)
ROSEMARY A GARMANN

Mailing Address 5349 JULMAR DR

City	State	Zip Code
CINCINNATI	OH	45238

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.145244

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	4		2	0	1	6

Amount of Each Receipt this Period

<input type="text" value="100.00"/>

Memo Item

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

Mailing Address 7104 TIMBERROSE WAY

City	State	Zip Code
ROSEVILLE	CA	95747

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.145329

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	0		2	0	1	6

Amount of Each Receipt this Period

<input type="text" value="50.00"/>

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
WALTER GERHARDT

Mailing Address 9503 GULFSTREAM RD

City State Zip Code
FRANKFORT IL 60423

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.145428

Date of Receipt
M M / D D / Y Y Y Y
05 / 24 / 2016

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
WAYNE A GERTH

Mailing Address N5845 COUNTY ROAD EAST

City State Zip Code
IRON RIDGE WI 53035

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144660

Date of Receipt
M M / D D / Y Y Y Y
05 / 27 / 2016

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
MARTHA P GIESE

Mailing Address 20 FRAMINGHAM LN

City State Zip Code
PITTSFORD NY 14534

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.145230

Date of Receipt
M M / D D / Y Y Y Y
05 / 24 / 2016

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
ANN GLENDINNING

Mailing Address 318 S. BEACH RD.

City State Zip Code
HOBE SOUND FL 33455

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144777

Date of Receipt
M M / D D / Y Y Y Y
05 / 24 / 2016

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
PHOEBE J GOFF

Mailing Address W2960 LA FOLLETTE RD

City State Zip Code
NEOSHO WI 53059

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144768

Date of Receipt
M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 313 PERFECTO LOPEZ R

City State Zip Code
CORRALES NM 87048

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.145050

Date of Receipt
M M / D D / Y Y Y Y
05 / 31 / 2016

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
WINFORD H GUIN

Mailing Address 2138 SONNING DRIVE

City	State	Zip Code
GERMANTOWN	TN	38138

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.145117

Date of Receipt

M M / D D / Y Y Y Y
05 / 17 / 2016

Amount of Each Receipt this Period

<input type="text" value="100.00"/>

Memo Item

B. Full Name (Last, First, Middle Initial)
MARLENE E HADDEN

Mailing Address 25235 NEW ROAD

City	State	Zip Code
NORTH LIBERTY	IN	46554

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144865

Date of Receipt

M M / D D / Y Y Y Y
05 / 19 / 2016

Amount of Each Receipt this Period

<input type="text" value="40.00"/>

Memo Item

C. Full Name (Last, First, Middle Initial)
EDWARD H HAMM

Mailing Address 243 S BEACH ROAD

City	State	Zip Code
HOBE SOUND	FL	33455

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144489

Date of Receipt

M M / D D / Y Y Y Y
05 / 27 / 2016

Amount of Each Receipt this Period

<input type="text" value="900.00"/>

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
PETER J HANNON

Mailing Address 962 TARRANT DR

City: FONTANA State: WI Zip Code: 53125

FEC ID number of contributing federal political committee.

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144231

Date of Receipt
M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
MR. BERNARD E HARTMAN

Mailing Address 108 LARISA LANE

City: ITHACA State: NY Zip Code: 14850

FEC ID number of contributing federal political committee.

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.145481

Date of Receipt
M M / D D / Y Y Y Y
05 / 26 / 2016

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
MR. TSUKASA HATAKEYAMA

Mailing Address 285 OXFORD STREET, APT 2B

City: ROCHESTER State: NY Zip Code: 14607

FEC ID number of contributing federal political committee.

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144952

Date of Receipt
M M / D D / Y Y Y Y
05 / 19 / 2016

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
MRS EDITH P HAWKINS

Mailing Address 12 W SHADY LANE

City	State	Zip Code
HOUSTON	TX	77063

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144779

Date of Receipt

M M / D D / Y Y Y Y
05 / 24 / 2016

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
JOHN T HAZEL

Mailing Address 6254 HUNTLEY ROAD

City	State	Zip Code
BROAD RUN	VA	20137

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	BUSINESSMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144213

Date of Receipt

M M / D D / Y Y Y Y
05 / 16 / 2016

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 207 S MAIN STREET

City	State	Zip Code
MANTENO	IL	60950

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
ROMAN CATHOLIC DIOCESE OF JOLIET	CATHOLIC PREIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144358

Date of Receipt

M M / D D / Y Y Y Y
05 / 19 / 2016

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
BARRET HEISE

Mailing Address 2245 TEAKWOOD CIRCLE APT A

City State Zip Code
HIGHLAND IN 46322

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144869

Date of Receipt
M M / D D / Y Y Y Y
05 / 19 / 2016

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
KENNETH G HELFRECHT

Mailing Address 6205 MINERAL POINT RD APT 622

City State Zip Code
MADISON WI 53705

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144994

Date of Receipt
M M / D D / Y Y Y Y
05 / 25 / 2016

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 16660 LEON TERRACE

City State Zip Code
BROOKFIELD WI 53005

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144805

Date of Receipt
M M / D D / Y Y Y Y
05 / 10 / 2016

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) MR. STEPHEN HERSON		Transaction ID : SA17A.144153	
Mailing Address 146 WHITNEY HILL ROAD		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2016	
City TUNBRIDGE	State VT	Zip Code 05077	
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	
Name of Employer SELF-EMPLOYED	Occupation REAL ESTATE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="555.00"/>	
		Amount of Each Receipt this Period <input type="text" value="50.00"/>	
		<input type="checkbox"/> Memo Item	

B. Full Name (Last, First, Middle Initial) MR. STEPHEN HERSON		Transaction ID : SA17A.144356	
Mailing Address 146 WHITNEY HILL ROAD		Date of Receipt M M / D D / Y Y Y Y 05 / 20 / 2016	
City TUNBRIDGE	State VT	Zip Code 05077	
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	
Name of Employer SELF-EMPLOYED	Occupation REAL ESTATE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="605.00"/>	
		Amount of Each Receipt this Period <input type="text" value="50.00"/>	
		<input type="checkbox"/> Memo Item	

C. Full Name (Last, First, Middle Initial) DONALD R HEYDEN		Transaction ID : SA17A.144880	
Mailing Address 205 KING RICHARD STREET		Date of Receipt M M / D D / Y Y Y Y 05 / 23 / 2016	
City IRVING	State TX	Zip Code 75061	
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="250.00"/>	
		Amount of Each Receipt this Period <input type="text" value="50.00"/>	
		<input type="checkbox"/> Memo Item	

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

(check only one)

16 17a 17b 17c 17d 18
 19a 19b 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) HERBERT HICKMAN		Transaction ID : SA17A.144264 Date of Receipt M M / D D / Y Y Y Y 05 / 24 / 2016
Mailing Address 830 BIG VALLEY DRIVE		
City COLORADO SPRING	State CO	
FEC ID number of contributing federal political committee.		
Name of Employer HICKMAN BROTHERS PARTNERSHIP		
Occupation INVENTOR		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period _____ 112.00 <input type="checkbox"/> Memo Item
Election Cycle-to-Date ▼ _____ 223.00		

B. Full Name (Last, First, Middle Initial) JULIE HILL		Transaction ID : SA17A.145446 Date of Receipt M M / D D / Y Y Y Y 05 / 20 / 2016
Mailing Address 3075 FOOTHILL BLVD		
City LA CRESCENTA	State CA	
FEC ID number of contributing federal political committee.		
Name of Employer LA SUPERIOR COURT		
Occupation HUMAN RESOURCES ANALYST		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period _____ 35.00 <input type="checkbox"/> Memo Item
Election Cycle-to-Date ▼ _____ 260.00		

C. Full Name (Last, First, Middle Initial) JUANITA HUFF		Transaction ID : SA17A.145298 Date of Receipt M M / D D / Y Y Y Y 05 / 23 / 2016
Mailing Address 1910 SAINT CLAIR DR		
City PEKIN	State IL	
FEC ID number of contributing federal political committee.		
Name of Employer RETIRED		
Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period _____ 53.00 <input type="checkbox"/> Memo Item
Election Cycle-to-Date ▼ _____ 209.00		

Subtotal Of Receipts This Page (optional).....▶ _____ 200.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
MR. J. M JEMIOLA

Mailing Address 2016 GRANT AVENUE

City State Zip Code
REDONDO BEACH CA 90278

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17A.144402

Date of Receipt
M M / D D / Y Y Y Y
05 / 26 / 2016

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
GLENN JENNE

Mailing Address 435 RIDGE ROAD, APT 403

City State Zip Code
WILMETTE IL 60091

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17A.145220

Date of Receipt
M M / D D / Y Y Y Y
05 / 31 / 2016

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 5626 DELCLIFF CIRCLE

City State Zip Code
SACRAMENTO CA 95822

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17A.144990

Date of Receipt
M M / D D / Y Y Y Y
05 / 25 / 2016

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
FRANCIS JONES

Mailing Address **1616 WALLOOMSAC ROAD**

City	State	Zip Code
BENNINGTON	VT	05201

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
.....**500.00**.....

Transaction ID : **SA17A.144289**

Date of Receipt

M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Receipt this Period

.....**100.00**.....

Memo Item

B. Full Name (Last, First, Middle Initial)
VADIM KAGANSKIY

Mailing Address **5407 DIAMOND HEIGHTS**

City	State	Zip Code
SAN FRANCISCO	CA	94131

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

Name of Employer	Occupation
PROGRAMMER	WALMART

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
.....**225.00**.....

Transaction ID : **SA17A.144465**

Date of Receipt

M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Receipt this Period

.....**50.00**.....

Memo Item

C. Full Name (Last, First, Middle Initial)
JAMES H KATSCHKE

Mailing Address **2349 E BEMES RD**

City	State	Zip Code
CRETE	IL	60417

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
.....**238.00**.....

Transaction ID : **SA17A.145017**

Date of Receipt

M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Receipt this Period

.....**25.00**.....

Memo Item

Subtotal Of Receipts This Page (optional).....▶.....**175.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
SYLVIA KELLEY

Mailing Address P.O. BOX 302

City	State	Zip Code
MYSTIC	CT	06355

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144457

Date of Receipt
M M / D D / Y Y Y Y
 /

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
MRS. MARY T KELLNER

Mailing Address 5112 W HIGHLAND RD

City	State	Zip Code
MEQUON	WI	53092

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.145497

Date of Receipt
M M / D D / Y Y Y Y
 /

REATTRIBUTION FROM SPOUSE

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
MR. TED D KELLNER

Mailing Address 5112 W HIGHLAND RD

City	State	Zip Code
MEQUON	WI	53092

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
FIDUCIARY MANAGEMENT, INC.	CHAIRMAN & CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144535

Date of Receipt
M M / D D / Y Y Y Y
 /

SEE REATTRIBUTION

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
MR. TED D KELLNER

Mailing Address 5112 W HIGHLAND RD

City State Zip Code
MEQUON WI 53092

FEC ID number of contributing federal political committee.

Name of Employer Occupation
FIDUCIARY MANAGEMENT, INC. CHAIRMAN & CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144536

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2016

REATTRIBUTION TO SPOUSE

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
LOIS KELLY

Mailing Address 28231 PARKHILL STREET

City State Zip Code
FARMINGTON HILLS MI 48334

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144663

Date of Receipt
M M / D D / Y Y Y Y
05 / 27 / 2016

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 2312 AMHERST ST

City State Zip Code
FORT COLLINS CO 80525

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.145081

Date of Receipt
M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
DEAN KENNEDY

Mailing Address **1004 S SIERRA VISTA AVE**

City **ALHAMBRA** State **CA** Zip Code **91801**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1650.00

Transaction ID : SA17A.145328

Date of Receipt
 M M / D D / Y Y Y Y
05 / 10 / 2016

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DAVID S KENYON

Mailing Address **P.O. BOX 205**

City **OAKFIELD** State **WI** Zip Code **53065**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
255.00

Transaction ID : SA17A.144774

Date of Receipt
 M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address **402 PINE ISLAND LANE**

City **SCHOFIELD** State **WI** Zip Code **54476**

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

Name of Employer **WAYAN SUPPLY CO** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
700.00

Transaction ID : SA17A.144770

Date of Receipt
 M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Receipt this Period
500.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ **650.00**

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

PAGE 38 / 95

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
PAUL D KOCH

Mailing Address **5374 MOONLITE DR**

City	State	Zip Code
DE PERE	WI	54115

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
GREEN BAY ONCOLOGY	MEDICAL DOCTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144269

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	1	6

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
LESLIE J KONRAD

Mailing Address **601 WARWICK RD**

City	State	Zip Code
HADDONFIELD	NJ	08033

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144706

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	1	6

Amount of Each Receipt this Period

Memo Item

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

Mailing Address **2510 MARIGOLD CT**

City	State	Zip Code
RACINE	WI	53402

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144411

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	1	6

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

16 17a 17b 17c 17d 18
 19a 19b 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
GORDON LANG

Mailing Address 301EAST BEAUMONT AVENUE APT 303

City State Zip Code
WHITEFISH BAY WI 53217

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
910.00

Transaction ID : SA17A.145101

Date of Receipt

MM / DD / YYYY
05 / 11 / 2016

Amount of Each Receipt this Period

100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GORDON LANG

Mailing Address 301EAST BEAUMONT AVENUE APT 303

City State Zip Code
WHITEFISH BAY WI 53217

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1010.00

Transaction ID : SA17A.144240

Date of Receipt

MM / DD / YYYY
05 / 24 / 2016

Amount of Each Receipt this Period

100.00

Memo Item

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

Mailing Address 4920 S LOWES CREEK R

City State Zip Code
EAU CLAIRE WI 54701

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

Name of Employer Occupation
LARSON DEVELOPMENT PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Transaction ID : SA17A.144950

Date of Receipt

MM / DD / YYYY
05 / 19 / 2016

Amount of Each Receipt this Period

100.00

Memo Item

Subtotal Of Receipts This Page (optional).....

300.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
ELMER LASHUA

Mailing Address 70 OAK ST
A

City TRYON State NC Zip Code 28782

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
501.00

Transaction ID : SA17A.144877

Date of Receipt
M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Receipt this Period
75.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ELROY LEHMANN

Mailing Address 6417 W KENSINGTON RD

City OKLAHOMA CITY State OK Zip Code 73132

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1600.00

Transaction ID : SA17A.145354

Date of Receipt
M M / D D / Y Y Y Y
05 / 20 / 2016

Amount of Each Receipt this Period
300.00

Memo Item

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

Mailing Address 2926 LAUREL PARK HWY.

City HENDERSONVILLE State NC Zip Code 28739

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17A.144876

Date of Receipt
M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Receipt this Period
100.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ 475.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 41 / 95

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
CORDELIA LENZ

Mailing Address 3261 FOSTERS BRANCH ROA

City State Zip Code
CHARLOTTESVIL VA 22911

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
788.00

Transaction ID : SA17A.144263

Date of Receipt

05 / 24 / 2016

Amount of Each Receipt this Period

338.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MR. HERBERT A LEVIN

Mailing Address 724 E GRINNELL DRIVE

City State Zip Code
BURBANK CA 91501

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
290.00

Transaction ID : SA17A.144421

Date of Receipt

05 / 24 / 2016

Amount of Each Receipt this Period

60.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JOHN K LIMPUS

Mailing Address 9613 JUNIPER STREET

City State Zip Code
APPLE VALLEY CA 92308

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17A.144227

Date of Receipt

05 / 23 / 2016

Amount of Each Receipt this Period

50.00

Memo Item

Subtotal Of Receipts This Page (optional)..... **448.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
TOM E LOUGHEAD

Mailing Address **2500 GARFIELD ST**

City **TWO RIVERS** State **WI** Zip Code **54241**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **225.00**

Transaction ID : SA17A.144819

Date of Receipt
 M M / D D / Y Y Y Y
05 / 25 / 2016

Amount of Each Receipt this Period
25.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ANGELO L LUINA

Mailing Address **4380 VIREO AVENUE
APT 3-1**

City **BRONX** State **NY** Zip Code **10470**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **300.00**

Transaction ID : SA17A.144689

Date of Receipt
 M M / D D / Y Y Y Y
05 / 24 / 2016

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address **605 PARK AVENUE NW**

City **WILLIAMS** State **MN** Zip Code **56686**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **475.00**

Transaction ID : SA17A.145253

Date of Receipt
 M M / D D / Y Y Y Y
05 / 18 / 2016

Amount of Each Receipt this Period
200.00

Memo Item

Subtotal Of Receipts This Page (optional)..... **325.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
JAMES MACCO

Mailing Address 1316 CRYSTAL COVE TRAIL APT 2

City State Zip Code
GREEN BAY WI 54311

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

Name of Employer Occupation
MACCO'S FLOOR COVERING CENTER, INC VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.144857

Date of Receipt
M M / D D / Y Y Y Y
05 / 19 / 2016

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
KELLY MALCHINE

Mailing Address 27402 MALCHINE RD

City State Zip Code
WATERFORD WI 53185

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

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.145143

Date of Receipt
M M / D D / Y Y Y Y
05 / 24 / 2016

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DARRELL E MARTIN

Mailing Address W7584 ROBERT CT

City State Zip Code
HORTONVILLE WI 54944

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
396.00

Transaction ID : SA17A.144882

Date of Receipt
M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Receipt this Period
170.00

Memo Item

Subtotal Of Receipts This Page (optional)..... 520.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
MR. RICHARD C MARX

Mailing Address **PO BOX 440**

City State Zip Code
WAPPINGERS FALLS NY 12590

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
752.00

Transaction ID : SA17A.144403

Date of Receipt
M M / D D / Y Y Y Y
05 26 2016

Amount of Each Receipt this Period
251.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SEAN MCCANN

Mailing Address **PO BOX 942**

City State Zip Code
OAK FOREST IL 60452

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

Name of Employer Occupation
COOK COUNTY STATES ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.145501

Date of Receipt
M M / D D / Y Y Y Y
05 19 2016

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AUDREY Z MCCLELLAN

Mailing Address **2009 N PARKER DR**

City State Zip Code
JANESVILLE WI 53545

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1200.00

Transaction ID : SA17A.144679

Date of Receipt
M M / D D / Y Y Y Y
05 31 2016

Amount of Each Receipt this Period
500.00

Memo Item

Subtotal Of Receipts This Page (optional)..... **851.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
JOHN R MCCLELLAN

Mailing Address **W7803 STATE ROAD 11**

City State Zip Code
DELAVAN WI 53115

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17A.144542

Date of Receipt

05 / 20 / 2016

Amount of Each Receipt this Period

100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
THOMAS MCCLURE

Mailing Address **161 CHARLESTON LN**

City State Zip Code
FATE TX 75189

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
511.00

Transaction ID : SA17A.144430

Date of Receipt

05 / 25 / 2016

Amount of Each Receipt this Period

500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
B. J MCCOMBS

Mailing Address **PO BOX BH003**

City State Zip Code
SAN ANTONIO TX 78201

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

Name of Employer Occupation
MCCOMBS ENTERPRISES OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Transaction ID : SA17A.144377

Date of Receipt

05 / 20 / 2016

Amount of Each Receipt this Period

1000.00

Memo Item

Subtotal Of Receipts This Page (optional)..... **1600.00**

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
HARRY C MCCREARY

Mailing Address 180 BEACH DRIVE NE

City	State	Zip Code
SAINT PETERSBURG	FL	33701

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 600.00

Transaction ID : SA17A.145293

Date of Receipt

M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Receipt this Period

_____ 200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ROBERT MCDONALD

Mailing Address 1718 HILTON HEAD DR.

City	State	Zip Code
MADISON	WI	53719

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

Name of Employer	Occupation
DEAN HEALTH SYSTEM	PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.145366

Date of Receipt

M M / D D / Y Y Y Y
05 / 10 / 2016

Amount of Each Receipt this Period

_____ 100.00

Memo Item

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

Mailing Address 1686 SUMMIT PARK LANE

City	State	Zip Code
CRESTON	IA	50801

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

Name of Employer	Occupation
ADVANCED BIOHEALING, INC.	HEALTH POLICY DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Transaction ID : SA17A.144170

Date of Receipt

M M / D D / Y Y Y Y
05 / 10 / 2016

Amount of Each Receipt this Period

_____ 100.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ _____ 400.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
DOUGLAS MCKISSACK

Mailing Address **7 BITTERROOT LANE**

City	State	Zip Code
SAVANNAH	GA	31419

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

Name of Employer	Occupation
GULFSTREAM AERO	ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 800.00

Transaction ID : SA17A.145477

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	1	6

Amount of Each Receipt this Period

_____	200.00
-------	--------

Memo Item

B. Full Name (Last, First, Middle Initial)
CHARLES T MCNULTY

Mailing Address **1201 SHANNON CT**

City	State	Zip Code
JANESVILLE	WI	53546

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Transaction ID : SA17A.144490

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	0		2	0	1	6

Amount of Each Receipt this Period

_____	100.00
-------	--------

Memo Item

C. Full Name (Last, First, Middle Initial)
CHARLES T MCNULTY

Mailing Address **1201 SHANNON CT**

City	State	Zip Code
JANESVILLE	WI	53546

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 400.00

Transaction ID : SA17A.145341

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	0		2	0	1	6

Amount of Each Receipt this Period

_____	100.00
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Memo Item

Subtotal Of Receipts This Page (optional).....▶

_____	400.00
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Total This Period (last page this line number only).....▶

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**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
CHARLES T MCNULTY

Mailing Address 1201 SHANNON CT

City State Zip Code
JANESVILLE WI 53546

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.145342

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			10			2016			

Amount of Each Receipt this Period

<input type="text" value="100.00"/>

Memo Item

B. Full Name (Last, First, Middle Initial)
DUNCAN MCRAE

Mailing Address 327 GLEN ERICA

City State Zip Code
SHREVEPORTD LA 71106

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144944

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			17			2016			

Amount of Each Receipt this Period

<input type="text" value="100.00"/>

Memo Item

C. Full Name (Last, First, Middle Initial)
JACQUELINE Y MEESE

Mailing Address PO BOX 368

City State Zip Code
WESTON WV 26452

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144450

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			20			2016			

Amount of Each Receipt this Period

<input type="text" value="50.00"/>

Memo Item

Subtotal Of Receipts This Page (optional).....▶

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
J. C MILNE

Mailing Address 1312 SW 16TH AVE

City	State	Zip Code
PORTLAND	OR	97201

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

Name of Employer	Occupation
SELF-EMPLOYED	PROPERTY MANAGER

Receipt For: 2016	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	900.00

Transaction ID : SA17A.144235

Date of Receipt
MM / DD / YYYY
05 / 23 / 2016

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
RICHARD MORTON

Mailing Address 108 TALAVERA PLACE

City	State	Zip Code
PALM BEACH GARDENS	FL	33418

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

Name of Employer	Occupation
ASALEY CAP	REAL ESTATE

Receipt For: 2016	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	1025.00

Transaction ID : SA17A.144428

Date of Receipt
MM / DD / YYYY
05 / 24 / 2016

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
VIRGINIA L MUELLER

Mailing Address 29308 DURAND AVE

City	State	Zip Code
BURLINGTON	WI	53105

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	350.00

Transaction ID : SA17A.145221

Date of Receipt
MM / DD / YYYY
05 / 31 / 2016

Amount of Each Receipt this Period
50.00

Memo Item

Subtotal Of Receipts This Page (optional)..... **800.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
ARTHUR H MUIR

Mailing Address 1874 SUMMER CLOUD DRIVE

City THOUSAND OAKS State CA Zip Code 91362

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144291

Date of Receipt
M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
PHYLLIS NICHOLAS

Mailing Address 40 HOWARD ROAD

City GREENWICH State CT Zip Code 06831

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.145272

Date of Receipt
M M / D D / Y Y Y Y
05 / 10 / 2016

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 40 HOWARD ROAD

City GREENWICH State CT Zip Code 06831

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.145219

Date of Receipt
M M / D D / Y Y Y Y
05 / 31 / 2016

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

(check only one)

PAGE 51 / 95

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
DONALD P NIELSEN

Mailing Address 2625 W GALER ST

City	State	Zip Code
SEATTLE	WA	98199

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.145145

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	4		2	0	1	6

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
BEVERLY H OASHGAR

Mailing Address 306 N SEGOE RD

City	State	Zip Code
MADISON	WI	53705

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144211

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	1	6

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
BARBARA J PARNITZKE

Mailing Address 1528 NUTMEG COURT

City	State	Zip Code
SHEBOYGAN	WI	53081

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144404

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	1	6

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
HOWARD PAYNE

Mailing Address **PO BOX 925**

City State Zip Code
ANNA MARIA FL 34216

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

Name of Employer Occupation
PAYNE LAW GROUP LAWYER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.145431

Date of Receipt
M M / D D / Y Y Y Y
05 / 24 / 2016

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NANCY PENCE

Mailing Address **43959 FENNER AVE**

City State Zip Code
LANCASTER CA 93536

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

Name of Employer Occupation
RE/MAX ALL PRO REALTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
320.00

Transaction ID : SA17A.144524

Date of Receipt
M M / D D / Y Y Y Y
05 / 27 / 2016

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address **2556 HEMMI ROAD**

City State Zip Code
BELLINGHAM WA 98226

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
460.00

Transaction ID : SA17A.145281

Date of Receipt
M M / D D / Y Y Y Y
05 / 10 / 2016

Amount of Each Receipt this Period
35.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ **185.00**

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
BERVIN C PETERSON

Mailing Address 1929 W EVERGREEN AVENUE

City	State	Zip Code
CHICAGO	IL	60622

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

Name of Employer	Occupation
SELF-EMPLOYED	INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 400.00

Transaction ID : SA17A.144948

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			19			2016			

Amount of Each Receipt this Period

_____ 200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MARION PHELPS

Mailing Address 290 CEDAR DRIVE

City	State	Zip Code
MOUNT PLEASANT	MI	48858

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 235.00

Transaction ID : SA17A.144175

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			10			2016			

Amount of Each Receipt this Period

_____ 50.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MR. CHARLES R PITTELKOW

Mailing Address 4191 BAY BEACH LN APT 275

City	State	Zip Code
FORT MYERS BEACH	FL	33931

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 400.00

Transaction ID : SA17A.144412

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			26			2016			

Amount of Each Receipt this Period

_____ 200.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ _____ 450.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
SHIRLEY L POFF

Mailing Address 14913 SE MILL PLAIN BOULEVARD, APT

City State Zip Code
VANCOUVER WA 98684

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.145010

Date of Receipt

M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Receipt this Period

50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ANTHONY POGODZINSKI

Mailing Address 9609 MANITOU PK DR

City State Zip Code
MINOCQUA WI 54548

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17A.145495

Date of Receipt

M M / D D / Y Y Y Y
05 / 26 / 2016

Amount of Each Receipt this Period

150.00

Memo Item

C. Full Name (Last, First, Middle Initial)
RICHARD P PUCKETT

Mailing Address 1910 LONGWOOD LANE

City State Zip Code
BLOOMINGTON IL 61704

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Transaction ID : SA17A.144856

Date of Receipt

M M / D D / Y Y Y Y
05 / 19 / 2016

Amount of Each Receipt this Period

75.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ 275.00

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
JONATHAN RADKE

Mailing Address **136 SKYLINE DRIVE**

City **CARPENTERSVILLE** State **IL** Zip Code **60110**

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

Name of Employer **ANCHOR MECHANICAL** Occupation **PROJECT MANAGER**

Receipt For: 2016
 Primary General
 Other (specify) **▼**

Election Cycle-to-Date **400.00**

Transaction ID : SA17A.144234

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			23			2016			

Amount of Each Receipt this Period

150.00								
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Memo Item

B. Full Name (Last, First, Middle Initial)
ELAINE C RATKOVICH

Mailing Address **13414 N HAWTHORN DR**

City **SUN CITY** State **AZ** Zip Code **85351**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) **▼**

Election Cycle-to-Date **275.00**

Transaction ID : SA17A.144906

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			25			2016			

Amount of Each Receipt this Period

50.00								
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Memo Item

C. Full Name (Last, First, Middle Initial)
PETER J REGNA

Mailing Address **46 SPEAR ROAD**

City **RAMSEY** State **NJ** Zip Code **07446**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2016
 Primary General
 Other (specify) **▼**

Election Cycle-to-Date **250.00**

Transaction ID : SA17A.144635

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			23			2016			

Amount of Each Receipt this Period

100.00								
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Memo Item

Subtotal Of Receipts This Page (optional)..... **300.00**

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

PAGE 56 / 95

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
EDWARD REILLY

Mailing Address 5 OLD FIELD PL

City	State	Zip Code
NORWALK	CT	06853

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

Name of Employer	Occupation
SELF-EMPLOYED	ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 800.00

Transaction ID : SA17A.144653

Date of Receipt

M M / D D / Y Y Y Y
05 / 27 / 2016

Amount of Each Receipt this Period

_____ 100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MR. J. PETER RICKETTS

Mailing Address 6450 PRAIRIE AVE

City	State	Zip Code
OMAHA	NE	68132

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

Name of Employer	Occupation
DRAKON LLC	INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2700.00

Transaction ID : SA17A.144203

Date of Receipt

M M / D D / Y Y Y Y
05 / 10 / 2016

Amount of Each Receipt this Period

_____ 2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ROBIN G ROGERSON

Mailing Address 3848 JENNINGS ST

City	State	Zip Code
SAN DIEGO	CA	92106

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

Name of Employer	Occupation
GARDEN COMMUNITIES SAN DIEGO	PROJECT ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1100.00

Transaction ID : SA17A.144707

Date of Receipt

M M / D D / Y Y Y Y
05 / 31 / 2016

Amount of Each Receipt this Period

_____ 200.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ **3000.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="checked" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

<p>A. Full Name (Last, First, Middle Initial) WARREN RUTHERFORD</p> <p>Mailing Address 8600 SKYLINE DR</p> <p>City DALLAS State TX Zip Code 75243</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer RETIRED Occupation RETIRED</p> <p>Receipt For: 2016 <input checked="checked" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 450.00</p>	<p>Transaction ID : SA17A.144282</p> <p>Date of Receipt <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>05</td><td></td><td></td><td>23</td><td></td><td></td><td>2016</td><td></td><td></td><td></td> </tr> </table></p> <p>Amount of Each Receipt this Period 100.00</p> <p><input type="checkbox"/> Memo Item</p>	M	M	/	D	D	/	Y	Y	Y	Y	05			23			2016			
M	M	/	D	D	/	Y	Y	Y	Y												
05			23			2016															
<p>B. Full Name (Last, First, Middle Initial) PETER RUUD</p> <p>Mailing Address 18605 BONNIE LANE</p> <p>City BROOKFIELD State WI Zip Code 53045</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer RETIRED Occupation RETIRED</p> <p>Receipt For: 2016 <input checked="checked" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 350.00</p>	<p>Transaction ID : SA17A.144728</p> <p>Date of Receipt <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>05</td><td></td><td></td><td>11</td><td></td><td></td><td>2016</td><td></td><td></td><td></td> </tr> </table></p> <p>Amount of Each Receipt this Period 250.00</p> <p><input type="checkbox"/> Memo Item</p>	M	M	/	D	D	/	Y	Y	Y	Y	05			11			2016			
M	M	/	D	D	/	Y	Y	Y	Y												
05			11			2016															
<p>C. Full Name (Last, First, Middle Initial) SHEILA SAHNI</p> <p>Mailing Address 36 W CROWNVIEW</p> <p>City MOUNT VERNON State IL Zip Code 62864</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer RETIRED Occupation RETIRED</p> <p>Receipt For: 2016 <input checked="checked" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 215.00</p>	<p>Transaction ID : SA17A.144884</p> <p>Date of Receipt <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>05</td><td></td><td></td><td>23</td><td></td><td></td><td>2016</td><td></td><td></td><td></td> </tr> </table></p> <p>Amount of Each Receipt this Period 55.00</p> <p><input type="checkbox"/> Memo Item</p>	M	M	/	D	D	/	Y	Y	Y	Y	05			23			2016			
M	M	/	D	D	/	Y	Y	Y	Y												
05			23			2016															

Subtotal Of Receipts This Page (optional).....▶ 405.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
FELIX SALZBERG

Mailing Address 2 AARON CT

City CHERRY HILL	State NJ	Zip Code 08002
---------------------	-------------	-------------------

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

Name of Employer ANCORA PSYCHIATRIC HOSPITAL	Occupation PHYSICIAN
---	-------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 300.00

Transaction ID : SA17A.144627

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			23			2016			

Amount of Each Receipt this Period
 100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DAVID SAMUELSON

Mailing Address 1162 S DEER RUN

City ELLETTSVILLE	State IN	Zip Code 47429
----------------------	-------------	-------------------

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

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

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 300.00

Transaction ID : SA17A.144846

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			19			2016			

Amount of Each Receipt this Period
 100.00

Memo Item

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

Mailing Address 239 E 9585 SOUTH

City SANDY	State UT	Zip Code 84070
---------------	-------------	-------------------

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

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

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 525.00

Transaction ID : SA17A.144279

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			23			2016			

Amount of Each Receipt this Period
 25.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ 225.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
LEAH SCHAEFER

Mailing Address 9924 WELLINGTON WAY

City State Zip Code
FORT SMITH AR 72908

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17A.144546

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
TAMARA SCHOOF

Mailing Address 3930 WINDEMERE DRIVE

City State Zip Code
COLGATE WI 53017

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF-EMPLOYED REAL ESTATE AGENT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17A.144946

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 3 PURSUIT 10B

City State Zip Code
ALISO VIEJP CA 92656

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17A.144182

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
ROBERT SHAW

Mailing Address 126 LANGDON STREET

City State Zip Code
NEWTON MA 02458

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144581

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			23			2016			

Amount of Each Receipt this Period

<input type="text" value="75.00"/>

Memo Item

B. Full Name (Last, First, Middle Initial)
JOHN SHEPLEY

Mailing Address 10426 WHITE BRIDGE LN

City State Zip Code
SAINT LOUIS MO 63141

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144554

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			20			2016			

Amount of Each Receipt this Period

<input type="text" value="200.00"/>

Memo Item

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

Mailing Address 10709 W RIVER RD

City State Zip Code
BROOKLYN PARK MN 55443

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144600

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			27			2016			

Amount of Each Receipt this Period

<input type="text" value="50.00"/>

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) MRS. SUSANNE SHORE Mailing Address 6450 PRAIRIE AVENUE City OMAHA State NE Zip Code 68132 FEC ID number of contributing federal political committee. C Name of Employer HOMEMAKER Occupation HOMEMAKER Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2700.00		Transaction ID : SA17A.144201 Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2016 Amount of Each Receipt this Period 2700.00 <input type="checkbox"/> Memo Item
B. Full Name (Last, First, Middle Initial) BETSY A SHRIFT Mailing Address 118 BRULE ROAD City DE PERE State WI Zip Code 54115 FEC ID number of contributing federal political committee. C Name of Employer BAS REALTY LTD Occupation REALTOR Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 350.00		Transaction ID : SA17A.144704 Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2016 Amount of Each Receipt this Period 50.00 <input type="checkbox"/> Memo Item
C. Full Name (Last, First, Middle Initial) TED SIMPSON Mailing Address 231 BANBURY ROAD City COLUMBIA State SC Zip Code 29210 FEC ID number of contributing federal political committee. C Name of Employer RETIRED Occupation RETIRED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 400.00		Transaction ID : SA17A.144983 Date of Receipt M M / D D / Y Y Y Y 05 / 23 / 2016 Amount of Each Receipt this Period 200.00 <input type="checkbox"/> Memo Item

Subtotal Of Receipts This Page (optional).....▶ **2950.00**

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
JEFF SOHN

Mailing Address **N5764 CTH TT PO BOX 118**

City	State	Zip Code
SHEBOYGAN FALLS	WI	53085

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

Name of Employer	Occupation
JSM COMMUNICATIONS, INC	PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Transaction ID : SA17A.144152

Date of Receipt
MM / DD / YYYY
05 / 10 / 2016

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DENNIS SPINDLER

Mailing Address **1108 RIVER RESERVE DRIVE**

City	State	Zip Code
HARTLAND	WI	53029

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

Name of Employer	Occupation
PDC MIDWEST INC	ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17A.144385

Date of Receipt
MM / DD / YYYY
05 / 23 / 2016

Amount of Each Receipt this Period
300.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ARLANA ST. CLAIR

Mailing Address **3401 WIBLE ROAD**

City	State	Zip Code
BAKERSFIELD	CA	93309

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

Name of Employer	Occupation
FRANKS ST CLAIR MANAGEMENT COMPANY	CO-OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.145489

Date of Receipt
MM / DD / YYYY
05 / 26 / 2016

Amount of Each Receipt this Period
200.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ 550.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
ALBERT W STEWART

Mailing Address 2528 MONTGOMERY AVENUE SW

City	State	Zip Code
ROANOKE	VA	24015

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Transaction ID : SA17A.144847

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			19			2016			

Amount of Each Receipt this Period

_____	100.00
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Memo Item

B. Full Name (Last, First, Middle Initial)
WILLIAM STONE

Mailing Address 1072 288TH AVE.

City	State	Zip Code
BURLINGTON	WI	53105

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

Name of Employer	Occupation
SELF-EMPLOYED	APPLE FARMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17A.144326

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			10			2016			

Amount of Each Receipt this Period

_____	50.00
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Memo Item

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

Mailing Address 110 SHADY SPRING DR

City	State	Zip Code
HARVEST	AL	35749

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 225.00

Transaction ID : SA17A.144881

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			23			2016			

Amount of Each Receipt this Period

_____	50.00
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Memo Item

Subtotal Of Receipts This Page (optional).....▶ _____ 200.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 64 / 95

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
DOUGLAS E SUKUP

Mailing Address 1008 S 34TH ST

City State Zip Code
MILWAUKEE WI 53215

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144767

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	1	6

Amount of Each Receipt this Period

<input type="text" value="100.00"/>

Memo Item

B. Full Name (Last, First, Middle Initial)
KENNETH J SWEET

Mailing Address 4045 SOUTH 54TH STREET

City State Zip Code
MILWAUKEE WI 53220

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.145466

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	1	6

Amount of Each Receipt this Period

<input type="text" value="50.00"/>

Memo Item

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

Mailing Address 1953 S VIEW DR

City State Zip Code
FORT COLLINS CO 80524

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144837

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	1	6

Amount of Each Receipt this Period

<input type="text" value="50.00"/>

Memo Item

Subtotal Of Receipts This Page (optional).....

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
ROBERT N TERRALL

Mailing Address 6200 SW 45TH

City	State	Zip Code
PORTLAND	OR	97221

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
280.00

Transaction ID : SA17A.144673

Date of Receipt

M M / D D / Y Y Y Y
05 / 31 / 2016

Amount of Each Receipt this Period

200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
EARL THOMAS

Mailing Address 836 GORE RD

City	State	Zip Code
JACKSON	MS	39212

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.144713

Date of Receipt

M M / D D / Y Y Y Y
05 / 31 / 2016

Amount of Each Receipt this Period

100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LUCILLE R THOMPSON

Mailing Address 7 GLENEAGLES

City	State	Zip Code
SHOAL CREEK	AL	35242

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

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.144655

Date of Receipt

M M / D D / Y Y Y Y
05 / 27 / 2016

Amount of Each Receipt this Period

150.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ 450.00

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
ELIZABETH TILDEN

Mailing Address 1308 SUMMERHILL DRIVE

City	State	Zip Code
MALVERN	PA	19355

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144545

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			20			2016			

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
CARLA TRENT

Mailing Address 324 CHESTNUT HILL CT APT 16

City	State	Zip Code
THOUSAND OAKS	CA	91360

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.145292

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			23			2016			

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 7715 COLONY STREET

City	State	Zip Code
HOUSTON	TX	77036

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.145065

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			31			2016			

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 67 / 95

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
THERESE H VAUGHN

Mailing Address 2010 WOODHAVEN LN

City State Zip Code
DULUTH MN 55803

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17A.145254

Date of Receipt
M M / D D / Y Y Y Y
05 / 18 / 2016

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
SARA VOELZ

Mailing Address 23217 W 135TH STREET

City State Zip Code
PLAINFIELD IL 60544

FEC ID number of contributing federal political committee.

Name of Employer Occupation
TESKA ASSOCIATES, INC PRINCIPAL FINANCIAL OFFICER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17A.144900

Date of Receipt
M M / D D / Y Y Y Y
05 / 25 / 2016

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
DALE A WALKER

Mailing Address 450 LAURY LANE

City State Zip Code
NEW WILMINGTO PA 16142

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17A.144641

Date of Receipt
M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 68 / 95

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
DALE WALLS

Mailing Address 1016 VALLEY VIEW DR.

City	State	Zip Code
BLOOMFIELD	NM	87413-1495

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
TWIN STARS LTD.	MECHANIC

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144926

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	0		2	0	1	6

Amount of Each Receipt this Period

<input type="text" value="10.00"/>

Memo Item

B. Full Name (Last, First, Middle Initial)
JOYCE WANKE

Mailing Address 1205 SNELL ISLE BOULEVARD NE

City	State	Zip Code
ST PETERSBURG	FL	33704

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144206

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	1	6

Amount of Each Receipt this Period

<input type="text" value="2700.00"/>

Memo Item

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

Mailing Address 1205 SNELL ISLE BOULEVARD NE

City	State	Zip Code
ST PETERSBURG	FL	33704

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
JENNER & BLOCK, LLC	ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.144208

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	1	6

Amount of Each Receipt this Period

<input type="text" value="2700.00"/>

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
JEAN WARDEN

Mailing Address 1659 STATE ROAD OO

City State Zip Code
HOLTS SUMMIT MO 65043

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
260.00

Transaction ID : SA17A.145334

Date of Receipt
M M / D D / Y Y Y Y
05 / 10 / 2016

Amount of Each Receipt this Period
35.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JOEL S WEBSTER

Mailing Address 7121 CYPRESS CREEK L

City State Zip Code
CHARLOTTE NC 28210

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
900.00

Transaction ID : SA17A.144873

Date of Receipt
M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Receipt this Period
300.00

Memo Item

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

Mailing Address 5616 CAMBRIDGE LANE, UNIT 2

City State Zip Code
MOUNT PLEASANT WI 53406

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

Name of Employer Occupation
SELF-EMPLOYED ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
493.00

Transaction ID : SA17A.144671

Date of Receipt
M M / D D / Y Y Y Y
05 / 31 / 2016

Amount of Each Receipt this Period
93.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ 428.00

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
LORRAINE WINK

Mailing Address **611 S OAKLAND AVENUE**

City **VILLA PARK** State **IL** Zip Code **60181**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **500.00**

Transaction ID : SA17A.144908

Date of Receipt
 M M / D D / Y Y Y Y
05 / 25 / 2016

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DONALD E WINTER

Mailing Address **7712 APPLE MILL PL**

City **LOUISVILLE** State **KY** Zip Code **40228**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **350.00**

Transaction ID : SA17A.144795

Date of Receipt
 M M / D D / Y Y Y Y
05 / 26 / 2016

Amount of Each Receipt this Period
150.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CAROLINE A WOKATSCH

Mailing Address **1357 WHIPPOORWILL ROAD**

City **MARATHON** State **WI** Zip Code **54448**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **425.00**

Transaction ID : SA17A.145208

Date of Receipt
 M M / D D / Y Y Y Y
05 / 31 / 2016

Amount of Each Receipt this Period
20.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ **270.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
HERBERT O WOLDING

Mailing Address **PO BOX 56**

City **NELSONVILLE** State **WI** Zip Code **54458**

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

Name of Employer **H.O WOLDING** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17A.145036

Date of Receipt
M M / D D / Y Y Y Y
05 / 24 / 2016

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JULIANN WOLF

Mailing Address **920 NORTHVIEW AVE.**

City **GREAT FALLS** State **MT** Zip Code **59404**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.144763

Date of Receipt
M M / D D / Y Y Y Y
05 / 23 / 2016

Amount of Each Receipt this Period
25.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JAMES L WRIGHT

Mailing Address **4279 W LINDA DRIVE**

City **DOUGLASVILLE** State **GA** Zip Code **30134**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Transaction ID : SA17A.145175

Date of Receipt
M M / D D / Y Y Y Y
05 / 24 / 2016

Amount of Each Receipt this Period
100.00

Memo Item

Subtotal Of Receipts This Page (optional)..... **225.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 72 / 95

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) WILLIAM E WUESTHOFF		Transaction ID : SA17A.144454	
Mailing Address 10737 N ESSEX COURT		Date of Receipt M M / D D / Y Y Y Y 05 / 20 / 2016	
City MEQUON	State WI	Zip Code 53092	
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="1400.00"/>	
		Amount of Each Receipt this Period <input type="text" value="200.00"/>	
		<input type="checkbox"/> Memo Item	

B. Full Name (Last, First, Middle Initial) BRYAN ZABINSKI		Transaction ID : SA17A.144613	
Mailing Address 912 KERSHAW DRIVE		Date of Receipt M M / D D / Y Y Y Y 05 / 02 / 2016	
City WINTER GARDEN	State FL	Zip Code 34787	
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	
Name of Employer I LOVE THIS BAR AND GRILL	Occupation GENERAL MANAGER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="2700.00"/>	
		Amount of Each Receipt this Period <input type="text" value="2700.00"/>	
		<input type="checkbox"/> Memo Item	

C. Full Name (Last, First, Middle Initial) JAMES ZIPERSKI		Transaction ID : SA17A.144602	
Mailing Address 19300-B MCALLISTER LANE		Date of Receipt M M / D D / Y Y Y Y 05 / 27 / 2016	
City BROOKFIELD	State WI	Zip Code 53045	
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="325.00"/>	
		Amount of Each Receipt this Period <input type="text" value="100.00"/>	
		<input type="checkbox"/> Memo Item	

Subtotal Of Receipts This Page (optional).....

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input checked="" type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
XCEL ENERGY EMPLOYEE POLITICAL ACTION COMMITTEE (XPAC)

Transaction ID : SA17C.144720

Mailing Address 1800 LARIMER STREET, SUITE 1600

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	1	6

City	State	Zip Code
DENVER	CO	80202

FEC ID number of contributing federal political committee. **C** C00107771

Amount of Each Receipt this Period

5	0	0	0	0	0
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Name of Employer Occupation

Memo Item

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Mailing Address

City	State	Zip Code

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

Amount of Each Receipt this Period

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Name of Employer Occupation

Memo Item

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Mailing Address

City	State	Zip Code

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

Amount of Each Receipt this Period

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Name of Employer Occupation

Memo Item

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Subtotal Of Receipts This Page (optional).....▶

5000.00

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

5000.00

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

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

Mailing Address PO BOX 94510

City	State	Zip Code
PALATINE	IL	60094

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA20A.144532

Date of Receipt
M M / D D / Y Y Y Y

VENDOR REFUND

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

FEC ID number of contributing federal political committee.

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

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.

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

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
CONNECTIVIST MEDIA LLC

Mailing Address **544 E OGDEN AVENUE**

City **MILWAUKEE** State **WI** Zip Code **53202**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
18340.59

Transaction ID : SA21.144553

Date of Receipt
 M M / D D / Y Y Y Y
05 / 06 / 2016

SALE OF OFFICE EQUIPMENT - FAIR MARKET VALUE

Amount of Each Receipt this Period
14380.92

Memo Item

B. Full Name (Last, First, Middle Initial)
GRANITE LISTS LLC

Mailing Address **POST OFFICE BOX 262**

City **DUBLIN** State **NH** Zip Code **03444-0262**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
188994.63

Transaction ID : SA21.144204

Date of Receipt
 M M / D D / Y Y Y Y
05 / 11 / 2016

LIST RENTAL - FAIR MARKET VALUE

Amount of Each Receipt this Period
16650.00

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

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....▶ **31030.92**

Total This Period (last page this line number only).....▶ **31030.92**

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

Full Name (Last, First, Middle Initial) A. ASHBY LAW PLLC		Date of Disbursement MM / DD / YYYY 05 / 09 / 2016
Mailing Address 717 PRINCESS STREET		Transaction ID : SB23.144132
City ALEXANDRIA	State VA	
Purpose of Disbursement LEGAL CONSULTING	Candidate Name	Amount of Each Disbursement this Period 787.50
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. ATLAS STRATEGY GROUP LLC		Date of Disbursement MM / DD / YYYY 05 / 13 / 2016
Mailing Address 16 LOREN WOODS		Transaction ID : SB23.144111
City ST LOUIS	State MO	
Purpose of Disbursement STRATEGY CONSULTING	Candidate Name	Amount of Each Disbursement this Period 7800.58
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. BMO HARRIS BANK		Date of Disbursement MM / DD / YYYY 05 / 11 / 2016
Mailing Address 1 W MAIN STREET		Transaction ID : SB23.144133
City MADISON	State WI	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 166.46
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 Receipts This Page (optional)..... **8754.54**

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

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. BURCHFIELD ENTERPRISES LLC

Full Name (Last, First, Middle Initial)
Mailing Address 633 W WILSON ST #419

City MADISON State WI Zip Code 53703

Purpose of Disbursement TECHNICAL SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
05 / 27 / 2016

Transaction ID : SB23.144134

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. CONNECTIVIST MEDIA

Full Name (Last, First, Middle Initial)
Mailing Address 544 E OGDEN AVE #700-161

City MILWAUKEE State WI Zip Code 53202

Purpose of Disbursement ONLINE ADVERTISING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
05 / 27 / 2016

Transaction ID : SB23.144112

Amount of Each Disbursement this Period: 10000.00

Memo Item

C. DINERS CLUB MASTERCARD

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 5732

City CAROL STREAM State IL Zip Code 60197

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: MM / DD / YYYY
05 / 27 / 2016

Transaction ID : SB23.144135

Amount of Each Disbursement this Period: 402.36

Memo Item

Subtotal Of Receipts This Page (optional)..... 11402.36

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

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

Full Name (Last, First, Middle Initial)
A. FLS CONNECT LLC

Mailing Address 7300 HUDSON BLVD #270

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
TELEMARKETING AND DATA

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
05 / 13 / 2016

Transaction ID : SB23.144113

Amount of Each Disbursement this Period
25000.00

Memo Item

Category/Type
101

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

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement
ONLINE ADVERTISING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
05 / 13 / 2016

Transaction ID : SB23.144114

Amount of Each Disbursement this Period
16519.91

Memo Item

Category/Type
101

Full Name (Last, First, Middle Initial)
C. GRANITE LISTS LLC

Mailing Address POST OFFICE BOX 262

City DUBLIN State NH Zip Code 03444-0262

Purpose of Disbursement
LIST RENTAL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
05 / 13 / 2016

Transaction ID : SB23.144136

Amount of Each Disbursement this Period
801.34

Memo Item

Category/Type

Subtotal Of Receipts This Page (optional)..... 42321.25

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

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

Full Name (Last, First, Middle Initial) A. GROUND GAME STRATEGIES		Date of Disbursement MM / DD / YYYY 05 / 09 / 2016
Mailing Address 300 HICKORY LANE		Transaction ID : SB23.144115
City MAULDIN State SC Zip Code 29662	Amount of Each Disbursement this Period 4679.87	
Purpose of Disbursement FIELD CONSULTING	Category/Type 101	<input type="checkbox"/> Memo 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. INFORELIANCE		Date of Disbursement MM / DD / YYYY 05 / 27 / 2016
Mailing Address LEGATO RD		Transaction ID : SB23.144116
City FAIRFAX State VA Zip Code 22033	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement TECHNICAL SERVICES	Category/Type 101	<input type="checkbox"/> Memo 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) C. ISTREAM FINANCIAL SERVICES		Date of Disbursement MM / DD / YYYY 05 / 03 / 2016
Mailing Address 13555 BISHOPS COURT		Transaction ID : SB23.144137
City BROOKFIELD State WI Zip Code 53005	Amount of Each Disbursement this Period 28.48	
Purpose of Disbursement BANK FEES	Category/Type	<input type="checkbox"/> Memo 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:		

Subtotal Of Receipts This Page (optional)..... 9708.35

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

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

Full Name (Last, First, Middle Initial) A. JONES DAY		Date of Disbursement MM / DD / YYYY 05 / 27 / 2016
Mailing Address PO BOX 7805, BEN FRANKLIN STATION		Transaction ID : SB23.144117
City WASHINGTON	State DC	
Purpose of Disbursement LEGAL CONSULTING	Zip Code 20044	Amount of Each Disbursement this Period 5000.00
Candidate Name	Category/ Type 101	<input type="checkbox"/> Memo Item
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. JUST WIN STRATEGIES		Date of Disbursement MM / DD / YYYY 05 / 09 / 2016
Mailing Address PO BOX 2561		Transaction ID : SB23.144118
City ALEXANDRIA	State VA	
Purpose of Disbursement FIELD CONSULTING	Zip Code 22301	Amount of Each Disbursement this Period 2500.00
Candidate Name	Category/ Type 101	<input type="checkbox"/> Memo Item
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. JUST WIN STRATEGIES		Date of Disbursement MM / DD / YYYY 05 / 27 / 2016
Mailing Address PO BOX 2561		Transaction ID : SB23.144119
City ALEXANDRIA	State VA	
Purpose of Disbursement FIELD CONSULTING	Zip Code 22301	Amount of Each Disbursement this Period 5000.00
Candidate Name	Category/ Type 101	<input type="checkbox"/> Memo Item
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 Receipts This Page (optional)..... 12500.00

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

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

Full Name (Last, First, Middle Initial) A. MASENG COMMUNICATIONS		Date of Disbursement MM / DD / YYYY 05 / 27 / 2016
Mailing Address 11309 BAROQUE ROAD		Transaction ID : SB23.144129
City SILVER SPRING State MD Zip Code 20901	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement COMMUNICATIONS CONSULTING	Category/Type 101	<input type="checkbox"/> Memo 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. PROSPECT STRATEGIC COMMUNICATIONS LLC		Date of Disbursement MM / DD / YYYY 05 / 23 / 2016
Mailing Address PO BOX 17079		Transaction ID : SB23.144120
City ARLINGTON State VA Zip Code 22216	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement COMMUNICATIONS CONSULTING	Category/Type 101	<input type="checkbox"/> Memo 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) C. RED CURVE SOLUTIONS LLC		Date of Disbursement MM / DD / YYYY 05 / 13 / 2016
Mailing Address 138 CONANT STREET 2ND FLOOR		Transaction ID : SB23.144121
City BEVERLY State MA Zip Code 01915	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement COMPLIANCE SOFTWARE & DEVELOPMENT	Category/Type 101	<input type="checkbox"/> Memo 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:		

Subtotal Of Receipts This Page (optional)..... 7000.00

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

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

Full Name (Last, First, Middle Initial) A. RED CURVE SOLUTIONS LLC		Date of Disbursement MM / DD / YYYY 05 / 27 / 2016
Mailing Address 138 CONANT STREET 2ND FLOOR		Transaction ID : SB23.144122
City BEVERLY State MA Zip Code 01915	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement COMPLIANCE SOFTWARE & DEVELOPMENT	Category/Type 101	<input type="checkbox"/> Memo 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. SCM ASSOCIATES INC.		Date of Disbursement MM / DD / YYYY 05 / 03 / 2016
Mailing Address PO BOX 254		Transaction ID : SB23.144124
City DUBLIN State NH Zip Code 03444	Amount of Each Disbursement this Period 12500.80	
Purpose of Disbursement DIRECT MAIL PRINTING AND POSTAGE	Category/Type 101	<input type="checkbox"/> Memo 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) C. SCM ASSOCIATES INC.		Date of Disbursement MM / DD / YYYY 05 / 09 / 2016
Mailing Address PO BOX 254		Transaction ID : SB23.144125
City DUBLIN State NH Zip Code 03444	Amount of Each Disbursement this Period 930.90	
Purpose of Disbursement DIRECT MAIL PRINTING AND POSTAGE	Category/Type 101	<input type="checkbox"/> Memo 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:		

Subtotal Of Receipts This Page (optional)..... 15431.70

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

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

Full Name (Last, First, Middle Initial) A. SCM ASSOCIATES INC.		Date of Disbursement MM / DD / YYYY 05 / 13 / 2016
Mailing Address PO BOX 254		Transaction ID : SB23.144126
City DUBLIN	State NH	
Purpose of Disbursement DIRECT MAIL PRINTING AND POSTAGE	Category/ Type 101	Amount of Each Disbursement this Period 1189.26
Candidate Name		<input type="checkbox"/> Memo Item
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. SCM ASSOCIATES INC.		Date of Disbursement MM / DD / YYYY 05 / 27 / 2016
Mailing Address PO BOX 254		Transaction ID : SB23.144127
City DUBLIN	State NH	
Purpose of Disbursement DIRECT MAIL PRINTING AND POSTAGE	Category/ Type 101	Amount of Each Disbursement this Period 2258.27
Candidate Name		<input type="checkbox"/> Memo Item
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. SHIRLEY & BANISTER PUBLIC AFFAIRS		Date of Disbursement MM / DD / YYYY 05 / 27 / 2016
Mailing Address 122 S PATRICK STREET		Transaction ID : SB23.144128
City ALEXANDRIA	State VA	
Purpose of Disbursement COMMUNICATIONS CONSULTING	Category/ Type 101	Amount of Each Disbursement this Period 2500.00
Candidate Name		<input type="checkbox"/> Memo Item
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 Receipts This Page (optional)..... 5947.53

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

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. STRIPE

Full Name (Last, First, Middle Initial)
Mailing Address 529 14TH STREET NW #350

City WASHINGTON State DC Zip Code 20045

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
05 / 13 / 2016

Transaction ID : SB23.144142

Amount of Each Disbursement this Period: 500.14

Memo Item

B. STRIPE

Full Name (Last, First, Middle Initial)
Mailing Address 529 14TH STREET NW #350

City WASHINGTON State DC Zip Code 20045

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
05 / 31 / 2016

Transaction ID : SB23.144143

Amount of Each Disbursement this Period: 30.00

Memo Item

C. WI DEPT OF REVENUE

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 8949

City MADISON State WI Zip Code 53708

Purpose of Disbursement
TAXES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
05 / 27 / 2016

Transaction ID : SB23.144146

Amount of Each Disbursement this Period: 114.32

Memo Item

Subtotal Of Receipts This Page (optional)..... 644.46

Total This Period (last page this line number only)..... 113710.19

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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)
SCOTT WALKER INC

Full Name (Last, First, Middle Initial) A. MARY KOHLER		Date of Disbursement MM / DD / YYYY 05 / 11 / 2016
Mailing Address PO BOX 897		Transaction ID : SB28A.144138
City SHEBOYGAN	State WI	
Purpose of Disbursement CONTRIBUTION REFUND		Amount of Each Disbursement this Period 1000.00
Candidate Name		<input type="checkbox"/> Memo Item
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. ARTHUR LANDGREN		Date of Disbursement MM / DD / YYYY 05 / 31 / 2016
Mailing Address 2707 SW 6TH STREET		Transaction ID : SB28A.144141
City DELRAY BEACH	State FL	
Purpose of Disbursement CONTRIBUTION REFUND		Amount of Each Disbursement this Period 100.00
Candidate Name		<input type="checkbox"/> Memo Item
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. CHARLES T MCNULTY		Date of Disbursement MM / DD / YYYY 05 / 13 / 2016
Mailing Address 1201 SHANNON CT		Transaction ID : SB28A.144140
City JANESVILLE	State WI	
Purpose of Disbursement CONTRIBUTION REFUND		Amount of Each Disbursement this Period 300.00
Candidate Name		<input type="checkbox"/> Memo Item
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 Receipts This Page (optional)..... 1400.00

Total This Period (last page this line number only)..... 1400.00

SCHEDULE D-P

DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: 11
 12

NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ACS SOUND & LIGHTING

Nature of Debt (Purpose):
EVENT STAGING EXPENSE

Mailing Address 110 LOTT COURT

City State Zip Code
WEST COLUMBIA SC 29169

Outstanding Balance Beginning This Period

14316.11

Transaction ID : SD12.137408

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

14316.11

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ATLAS STRATEGY GROUP LLC

Nature of Debt (Purpose):
STRATEGY CONSULTING

Mailing Address 16 LOREN WOODS

City State Zip Code
ST LOUIS MO 63124

Outstanding Balance Beginning This Period

7800.58

Transaction ID : SD12.137412

Amount Incurred This Period

0.00

Payment This Period

7800.58

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
BKZ CONSULTING INC.

Nature of Debt (Purpose):
FUNDRAISING CONSULTING

Mailing Address PO BOX 577832

City State Zip Code
CHICAGO IL 60657

Outstanding Balance Beginning This Period

16500.00

Transaction ID : SD12.137414

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

16500.00

- 1) **SUBTOTALS** This Period This Page (optional)
- 2) **TOTALS** This Period (last page this line number only)
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- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only).....

SCHEDULE D-P
DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: 11
 12

NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
COMMUNICATIONS CORPORATION OF AMERICA

Nature of Debt (Purpose):
 DIRECT MAIL PRINTING AND POSTAGE

Mailing Address 13195 FREEDOM WAY

City State Zip Code
 BOSTON VA 22713

Outstanding Balance Beginning This Period

Transaction ID : SD12.137416

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
CONNECTIVIST MEDIA

Nature of Debt (Purpose):
 ONLINE ADVERTISING

Mailing Address 544 E OGDEN AVE

#700-161

City State Zip Code
 MILWAUKEE WI 53202

Outstanding Balance Beginning This Period

Transaction ID : SD12.4105

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DRUCKER LAWHON LLP

Nature of Debt (Purpose):
 FUNDRAISING CONSULTING

Mailing Address 317 15TH STREET NE

City State Zip Code
 WASHINGTON DC 20002

Outstanding Balance Beginning This Period

Transaction ID : SD12.137419

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

- 1) **SUBTOTALS** This Period This Page (optional)
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SCHEDULE D-P
DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: 11
 12

NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FASTLY INC.

Nature of Debt (Purpose):
 DIGITAL CONSULTING

Mailing Address PO BOX 78266

City State Zip Code
 SAN FRANCISCO CA 94107

Outstanding Balance Beginning This Period

Transaction ID : SD12.137420

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS CONNECT LLC

Nature of Debt (Purpose):
 TELEMARKETING AND DATA

Mailing Address 7300 HUDSON BLVD #270

City State Zip Code
 SAINT PAUL MN 55128

Outstanding Balance Beginning This Period

Transaction ID : SD12.137421

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
GOOGLE INC.

Nature of Debt (Purpose):
 ONLINE ADVERTISING

Mailing Address 1600 AMPHITHEATRE PARKWAY

City State Zip Code
 MOUNTAIN VIEW CA 94043

Outstanding Balance Beginning This Period

Transaction ID : SD12.137422

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

- 1) **SUBTOTALS** This Period This Page (optional)
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SCHEDULE D-P
DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: 11
 12

NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
GROUND GAME STRATEGIES

Nature of Debt (Purpose):
 FIELD CONSULTING

Mailing Address 300 HICKORY LANE

City State Zip Code
 MAULDIN SC 29662

Outstanding Balance Beginning This Period

Transaction ID : SD12.137424

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
HARBINGER LLC

Nature of Debt (Purpose):
 EVENT CONSULTING

Mailing Address 1919 M STREET NW #200

City State Zip Code
 WASHINGTON DC 20036

Outstanding Balance Beginning This Period

Transaction ID : SD12.137425

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
INFORELIANCE

Nature of Debt (Purpose):
 TECHNICAL SERVICES

Mailing Address LEGATO RD

City State Zip Code
 FAIRFAX VA 22033

Outstanding Balance Beginning This Period

Transaction ID : SD12.141566

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

- 1) **SUBTOTALS** This Period This Page (optional)
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SCHEDULE D-P

DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
JONES DAY

Nature of Debt (Purpose):
LEGAL CONSULTING

Mailing Address **PO BOX 7805, BEN FRANKLIN STATION**

City State Zip Code
WASHINGTON DC 20044

Outstanding Balance Beginning This Period

Transaction ID : **SD12.137430**

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
JUST WIN STRATEGIES

Nature of Debt (Purpose):
FIELD CONSULTING

Mailing Address **PO BOX 2561**

City State Zip Code
ALEXANDRIA VA 22301

Outstanding Balance Beginning This Period

Transaction ID : **SD12.137431**

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MASENG COMMUNICATIONS

Nature of Debt (Purpose):
COMMUNICATIONS CONSULTING

Mailing Address **11309 BAROQUE ROAD**

City State Zip Code
SILVER SPRING MD 20901

Outstanding Balance Beginning This Period

Transaction ID : **SD12.4125**

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

- 1) **SUBTOTALS** This Period This Page (optional)
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SCHEDULE D-P
DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: 11
 12

NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MAVERICK FINANCE

Nature of Debt (Purpose):
FUNDRAISING CONSULTING

Mailing Address **403 N SECOND STREET, 2ND FL**

City State Zip Code
HARRISBURG PA 17101

Outstanding Balance Beginning This Period

Transaction ID : SD12.137442

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MMA EVENTS LLC

Nature of Debt (Purpose):
EVENT STAGING EXPENSE

Mailing Address **1851 SOUTH CLUB DRIVE**

City State Zip Code
HYATTSVILLE MD 20785

Outstanding Balance Beginning This Period

Transaction ID : SD12.4115

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NEW RIVER RESEARCH INSTITUTE LLC

Nature of Debt (Purpose):
DATA MANAGEMENT SERVICES

Mailing Address **2150 COUNTRY CLUB ROAD #221**

City State Zip Code
WINSTON-SALEM NC 27104

Outstanding Balance Beginning This Period

Transaction ID : SD12.137445

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

- 1) **SUBTOTALS** This Period This Page (optional)
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SCHEDULE D-P
DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: 11
 12

NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
POLITICODE

Nature of Debt (Purpose):
WEB DEVELOPMENT

Mailing Address **3 CIRCLE DRIVE**

City State Zip Code
CARMEL IN 46032

Outstanding Balance Beginning This Period

Transaction ID : **SD12.137448**

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
PROSPECT STRATEGIC COMMUNICATIONS LLC

Nature of Debt (Purpose):
COMMUNICATIONS CONSULTING

Mailing Address **PO BOX 17079**

City State Zip Code
ARLINGTON VA 22216

Outstanding Balance Beginning This Period

Transaction ID : **SD12.137451**

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
RED CURVE SOLUTIONS LLC

Nature of Debt (Purpose):
COMPLIANCE SOFTWARE & DEVELOPMENT

Mailing Address **138 CONANT STREET**
2ND FLOOR

City State Zip Code
BEVERLY MA 01915

Outstanding Balance Beginning This Period

Transaction ID : **SD12.137452**

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

- 1) **SUBTOTALS** This Period This Page (optional)
- 2) **TOTALS** This Period (last page this line number only)
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SCHEDULE D-P
DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: 11
 12

NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SCM ASSOCIATES INC.

Nature of Debt (Purpose):
 DIRECT MAIL PRINTING AND POSTAGE

Mailing Address PO BOX 254

City State Zip Code
 DUBLIN NH 03444

Outstanding Balance Beginning This Period

Transaction ID : SD12.137454

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SHARP POLITICS LLC

Nature of Debt (Purpose):
 VIDEO PRODUCTION SERVICES

Mailing Address PO BOX 25122

City State Zip Code
 ALEXANDRIA VA 22314

Outstanding Balance Beginning This Period

Transaction ID : SD12.137456

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SHIRLEY & BANISTER PUBLIC AFFAIRS

Nature of Debt (Purpose):
 COMMUNICATIONS CONSULTING

Mailing Address 122 S PATRICK STREET

City State Zip Code
 ALEXANDRIA VA 22314

Outstanding Balance Beginning This Period

Transaction ID : SD12.137457

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

- 1) **SUBTOTALS** This Period This Page (optional)
- 2) **TOTALS** This Period (last page this line number only)
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....
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SCHEDULE D-P
DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: 11
 12

NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SNOW PHOTOGRAPHY

Nature of Debt (Purpose):
 PHOTOGRAPHY SERVICES

Mailing Address PO BOX 34763

City State Zip Code
 WASHINGTON DC 20043

Outstanding Balance Beginning This Period

Transaction ID : SD12.137458

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SUPERIOR STRATEGIES LLC

Nature of Debt (Purpose):
 FUNDRAISING CONSULTING

Mailing Address 717 KING STREET #205

City State Zip Code
 ALEXANDRIA VA 22314

Outstanding Balance Beginning This Period

Transaction ID : SD12.137459

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
THE LUKENS COMPANY

Nature of Debt (Purpose):
 DIRECT MAIL PRINTING AND POSTAGE

Mailing Address 2800 SHIRLINGTON ROAD
 9TH FLOOR

City State Zip Code
 ARLINGTON VA 22206

Outstanding Balance Beginning This Period

Transaction ID : SD12.137460

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

- 1) **SUBTOTALS** This Period This Page (optional)
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- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....
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SCHEDULE D-P
DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: 11
 12

NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
TUSK PRODUCTIONS LLC

Nature of Debt (Purpose):
FUNDRAISING CONSULTING

Mailing Address **38 LAKEWOOD DRIVE**

City State Zip Code
DENVILLE NJ 07834

Outstanding Balance Beginning This Period

Transaction ID : SD12.137465

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="11338.28"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="807675.95"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only).....	<input type="text" value="807675.95"/>