

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

Republican Party of Wisconsin

ADDRESS (number and street) 148 East Johnson Street Madison WI 53703

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00074450

3. IS THIS REPORT NEW OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

- (a) Quarterly Reports: April 15 Quarterly Report (Q1), July 15 Quarterly Report (Q2), October 15 Quarterly Report (Q3), January 31 Year-End Report (YE), July 31 Mid-Year Report (Non-election Year Only) (MY), Termination Report (TER)

- (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11) (Non-Election Year Only), Dec 20 (M12) (Non-Election Year Only), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

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

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 Mike Jones

Signature of Treasurer Mike Jones [Electronically Filed] Date 05/09/2016

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

Table with 10 columns and 1 row for Office Use Only

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Republican Party of Wisconsin

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="209077.25"/>	<input type="text" value="209077.25"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="209077.25"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="187387.70"/>	<input type="text" value="187387.70"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="396464.95"/>	<input type="text" value="396464.95"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="148004.99"/>	<input type="text" value="148004.99"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="248459.96"/>	<input type="text" value="248459.96"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Republican Party of Wisconsin**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	65375.00	65375.00
(ii) Unitemized .....	68115.92	68115.92
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	133490.92	133490.92
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	1000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	134490.92	134490.92
12. Transfers From Affiliated/Other Party Committees.....	28750.00	28750.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	67.45	67.45
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	24079.33	24079.33
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	24079.33	24079.33
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	187387.70	187387.70
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	163308.37	163308.37

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	12752.62	12752.62
(ii) Non-Federal Share.....	22671.33	22671.33
(b) Other Federal Operating Expenditures .....	39149.42	39149.42
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	74573.37	74573.37
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	1408.00	1408.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	72023.62	72023.62
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	72023.62	72023.62
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	148004.99	148004.99
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	125333.66	125333.66

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	134490.92	134490.92
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	134490.92	134490.92
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	51902.04	51902.04
37. Offsets to Operating Expenditures (from Line 15, page 3).....	67.45	67.45
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	51834.59	51834.59

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

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

FOR LINE NUMBER: PAGE 6 OF 69  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. STEPHEN B. KING**

Mailing Address 3508 N EDGEWOOD DRIVE

City State Zip Code  
JANESVILLE WI 53545-9547

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

Name of Employer Occupation  
KING CAPITOL, LLC INVESTMENTS

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 04 / 2016  
**Transaction ID : SA11.991599**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. JEFFREY G. CAINE**

Mailing Address W7591 CREEK ROAD

City State Zip Code  
LOWELL WI 53557-9740

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

Name of Employer Occupation  
CAINE WAREHOUSING OWNER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 05 / 2016  
**Transaction ID : SA11.991629**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

Mailing Address 243 SOUTH BEACH ROAD

City State Zip Code  
HOBE SOUND FL 33455-2512

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

Name of Employer Occupation  
ACOMA OIL PARTNER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 05 / 2016  
**Transaction ID : SA11.991633**

Amount of Each Receipt this Period  
800.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6800.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 69		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. ROBERT LEHNER II**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3805 SPRING STREET  
 City RACINE State WI Zip Code 53405-1667  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED PER BEST EFF  
 Occupation INFORMATION REQUESTED PER BEST EFF  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 06 / 2016  
**Transaction ID : SA11.991715**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

**B. MR. ROBERT D. OLSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9433 N HAY CREEK ROD  
 City HAYWARD State WI Zip Code 54843-4483  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED  
 Occupation RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 12 / 2016  
**Transaction ID : SA11.991866**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**C. DONALD WEBER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 145 17TH STREET S  
 City LA CROSSE State WI Zip Code 54601-4255  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LOGISTICS HEALTH, INC  
 Occupation CEO  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 12 / 2016  
**Transaction ID : SA11.991849**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 69  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. JAMES D. POULSEN**

Mailing Address 333 LAKE AVE #306

City State Zip Code  
 RACINE WI 53403-1086

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

Name of Employer Occupation  
 RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 01 / 13 / 2016  
**Transaction ID : SA11.993114**

Amount of Each Receipt this Period  
 250.00

Memo Item  
 CONTRIBUTION

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

Mailing Address 4425 W MITCHELL ST

City State Zip Code  
 MILWAUKEE WI 53214-5402

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

Name of Employer Occupation  
 KBS CONSTRUCTION PRESIDENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 01 / 14 / 2016  
**Transaction ID : SA11.992347**

Amount of Each Receipt this Period  
 2500.00

Memo Item  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. FRED D. PANZER**

Mailing Address W6375 FIRELANE 8

City State Zip Code  
 MENASHA WI 54952-9746

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

Name of Employer Occupation  
 RADIOLOGY ASSOCIATES OF APPLETON M.D.

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 01 / 14 / 2016  
**Transaction ID : SA11.992282**

Amount of Each Receipt this Period  
 400.00

Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3150.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. PATRICK ENGLISH**  
Full Name (Last, First, Middle Initial)

Mailing Address 1825 N. 74TH ST.

City WAUWATOSA	State WI	Zip Code 53213-2219
-------------------	-------------	------------------------

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

Name of Employer FIDUCIARY MANAGEMENT	Occupation INVESTMENTS
--	---------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
01 / 15 / 2016  
**Transaction ID : SA11.993009**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. MR. JOSEPH H. FALL IV**  
Full Name (Last, First, Middle Initial)

Mailing Address 3716 TREMONT COURT

City MEQUON	State WI	Zip Code 53092-6306
----------------	-------------	------------------------

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

Name of Employer SELF EMPLOYED	Occupation RESTAURANTS
-----------------------------------	---------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
01 / 15 / 2016  
**Transaction ID : SA11.992431**

Amount of Each Receipt this Period  
225.00

Memo Item  
CONTRIBUTION

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

Mailing Address 2810 EAST MENLO BOULEVARD

City MILWAUKEE	State WI	Zip Code 53211-2652
-------------------	-------------	------------------------

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

Name of Employer US BANK	Occupation BANKER
-----------------------------	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
01 / 15 / 2016  
**Transaction ID : SA11.993011**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5725.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. WILLIAM W. GREAVES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8851 N BAYSIDE DRIVE  
 City BAYSIDE State WI Zip Code 53217-1910  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ABPM Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 19 / 2016  
**Transaction ID : SA11.993134**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 CONTRIBUTION

**B. JOHN PECK JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 829  
 City RANCHO SANTA FE State CA Zip Code 92067-0829  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PECK ENTERPRISES Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 01 / 19 / 2016  
**Transaction ID : SA11.993012**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item  
 CONTRIBUTION

**C. DETLEF B. MOORE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3704 NORTH LAKE DRIVE  
 City SHOREWOOD State WI Zip Code 53211-2646  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer IAO Occupation ASSOCIATION MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 20 / 2016  
**Transaction ID : SA11.992639**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 11 OF 69  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. WOLFGANG DORNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 655  
 City HARTLAND State WI Zip Code 53029-0655  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 22 / 2016  
**Transaction ID : SA11.993336**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
**CONTRIBUTION**

**B. FRED M. YOUNG JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3201 MICHIGAN BOULEVARD  
 City RACINE State WI Zip Code 53402-3819  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 01 / 22 / 2016  
**Transaction ID : SA11.993263**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item  
**CONTRIBUTION**

**C. DEAN D. FITZGERALD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3205 W COUNTY LINE ROAD  
 City MILWAUKEE State WI Zip Code 53217-1006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF EMPLOYED Occupation BUSINESS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 26 / 2016  
**Transaction ID : SA11.993459**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
**CONTRIBUTION**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. MICHAEL CUDAHY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 925 E WELLS ST  
 City MILWAUKEE State WI Zip Code 53202-3900  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer THE EDEAVORS GROUP, LLC Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 01 / 28 / 2016  
**Transaction ID : SA11.993527**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item  
 CONTRIBUTION

**B. NANCY EINHORN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8205 N. RIVER ROAD  
 City MILWAUKEE State WI Zip Code 53217-2546  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNEMPLOYED Occupation UNEMPLOYED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 28 / 2016  
**Transaction ID : SA11.993559**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 CONTRIBUTION

**C. LUCIA B. WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 695 N BROOKFIELD RD APT 222  
 City BROOKFIELD State WI Zip Code 53045-5849  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 01 / 28 / 2016  
**Transaction ID : SA11.993548**  
 Amount of Each Receipt this Period 350.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 13 OF 69  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. JAMES D. BELL**

Mailing Address 3900 W LEMONT BOULEVARD

City State Zip Code  
MEQUON WI 53092-5226

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

Name of Employer Occupation  
ROBERT W BAIRD AND COMPANY INVESTMENT BNKING

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
01 / 29 / 2016  
**Transaction ID : SA11.993621**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. WILLIAM W. GREAVES**

Mailing Address 8851 N BAYSIDE DRIVE

City State Zip Code  
BAYSIDE WI 53217-1910

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

Name of Employer Occupation  
ABPM PHYSICIAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
MM / DD / YYYY  
01 / 29 / 2016  
**Transaction ID : SA11.993983**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. KEITH R. MARDAK**

Mailing Address 2743 N LAKE DRIVE

City State Zip Code  
MILWAUKEE WI 53211-3851

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

Name of Employer Occupation  
HAL LEONARD CORP BUSINESS EXEC

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
01 / 29 / 2016  
**Transaction ID : SA11.993982**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

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

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

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

FOR LINE NUMBER: PAGE 14 OF 69  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. RICHARD MEEUSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address W289N3414 LOST CREEK COURT  
 City State Zip Code  
 PEWAUKEE WI 53072-3302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 BADGER METER INC CEO  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 29 / 2016  
**Transaction ID : SA11.993984**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item  
**CONTRIBUTION**

**B. KASANDRA PRESTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14505 HILLSIDE ROAD  
 City State Zip Code  
 ELM GROVE WI 53122-1621  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 29 / 2016  
**Transaction ID : SA11.993620**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
**CONTRIBUTION**

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	65375.00

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

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

FOR LINE NUMBER: PAGE 15 OF 69  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. NOVOLEX HOLDINGS, INC. RESPONSIBLE GOVERNMENT FUND**

Mailing Address P.O. BOX 1720

City State Zip Code  
HARTSVILLE SC 29551-1720

FEC ID number of contributing federal political committee. **C** C00508127

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 06 / 2016  
**Transaction ID : SA11.994762**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1000.00

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

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

FOR LINE NUMBER: PAGE 16 OF 69  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

**A. REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
Mailing Address 310 1ST ST SE

City WASHINGTON State DC Zip Code 20003-1885

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
28750.00

Date of Receipt  
MM / DD / YYYY  
01 / 07 / 2016

**Transaction ID : SA11.994886**

Amount of Each Receipt this Period  
28750.00

Memo Item  
TRANSFER

**B.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	28750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	28750.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.I23122**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. BMO HARRIS BANK**

Mailing Address 770 N WATER STREET

City State Zip Code  
MILWAUKEE WI 53201

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.I23115**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.I23123**

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. ARENA COMMUNICATIONS**

Mailing Address 1780 W SEQUOIA VISTA CIRCLE

City State Zip Code  
SALT LAKE CITY UT 84104

Purpose of Disbursement  
DIGITAL DESIGN

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 08 / 2016

Transaction ID : SB21B.I23144

Amount of Each Disbursement this Period

2750.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. LEARFIELD COMMUNICATIONS**

Mailing Address 505 HOBBS ROAD

City State Zip Code  
JEFFERSON CITY MO 65109

Purpose of Disbursement  
DIRECT MAIL FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 08 / 2016

Transaction ID : SB21B.I23142

Amount of Each Disbursement this Period

650.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 08 / 2016

Transaction ID : SB21B.I23124

Amount of Each Disbursement this Period

4.00

Memo Item

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

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

3404.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. BANCARD/FIS MERCHANT SERVICES**

Mailing Address 11000 W LAKE PARK DRIVE

City MILWAUKEE State WI Zip Code 53224

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB21B.I23121

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB21B.I23125

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB21B.I23126

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. BMO HARRIS BANK**

Mailing Address 770 N WATER STREET

City MILWAUKEE State WI Zip Code 53201

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 13 / 2016

Transaction ID : SB21B.I23116

Amount of Each Disbursement this Period

81.50

Memo Item

Full Name (Last, First, Middle Initial)

**B. BMO HARRIS BANK**

Mailing Address 770 N WATER STREET

City MILWAUKEE State WI Zip Code 53201

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 13 / 2016

Transaction ID : SB21B.I23117

Amount of Each Disbursement this Period

12.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 13 / 2016

Transaction ID : SB21B.I23127

Amount of Each Disbursement this Period

41.25

Memo Item

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

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

134.75

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. PIRYX**

Mailing Address **85 NATOMA STREET**

City **SAN FRANCISCO** State **CA** Zip Code **94105**

Purpose of Disbursement  
**CREDIT CARD PROCESSING FEE**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **01 / 15 / 2016**

Transaction ID : **SB21B.I23128**

Amount of Each Disbursement this Period: **214.80**

Memo Item

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

Mailing Address **85 NATOMA STREET**

City **SAN FRANCISCO** State **CA** Zip Code **94105**

Purpose of Disbursement  
**CREDIT CARD PROCESSING FEE**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **01 / 19 / 2016**

Transaction ID : **SB21B.I23129**

Amount of Each Disbursement this Period: **414.40**

Memo Item

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

Mailing Address **85 NATOMA STREET**

City **SAN FRANCISCO** State **CA** Zip Code **94105**

Purpose of Disbursement  
**CREDIT CARD PROCESSING FEE**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **01 / 20 / 2016**

Transaction ID : **SB21B.I23130**

Amount of Each Disbursement this Period: **17.00**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ **646.20**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. AMERICA RISING, LLC**

Mailing Address 1555 WILSON BOULEVARD

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement  
RESEARCH SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		21		2016

Transaction ID : SB21B.I23148

Amount of Each Disbursement this Period

3000.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**B. BMO HARRIS BANK**

Mailing Address P.O. BOX 3052

City MILWAUKEE State WI Zip Code 53201

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		21		2016

Transaction ID : SB21B.I23118

Amount of Each Disbursement this Period

3113.53
---------

Memo Item

Full Name (Last, First, Middle Initial)

**C. SAFESFT SOLUTIONS**

Mailing Address 20950 WARNER CENTER LANE

City WOODLAND State CA Zip Code 91367

Purpose of Disbursement  
PREDICTIVE DIALER

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		04		2015

Transaction ID : SB21B.I23169

Amount of Each Disbursement this Period

2030.00
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Memo Item

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

6113.53
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. VERTICAL RESPONSE**

Mailing Address 50 BEALE STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
EMAIL SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 09 / 2015

Transaction ID : SB21B.I23172

Amount of Each Disbursement this Period

749.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. CLOCKWORK SYSTEMS**

Mailing Address 6001 GLOSTER ROAD

City BETHESDA State MD Zip Code 20816

Purpose of Disbursement  
DATA SOLUTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 21 / 2016

Transaction ID : SB21B.I23138

Amount of Each Disbursement this Period

550.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. MAJORITY STRATEGIES**

Mailing Address 12854 KENAN DRIVE

City JACKSONVILLE State FL Zip Code 32258

Purpose of Disbursement  
DESIGN TIME

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 21 / 2016

Transaction ID : SB21B.I23143

Amount of Each Disbursement this Period

850.00

Memo Item

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

1400.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. PINNACLE LIST COMPANY**

Mailing Address 2800 SHIRLINGTON ROAD

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement  
DIRECT MAIL - NOT FEA

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 21 / 2016

Transaction ID : SB21B.I23139

Amount of Each Disbursement this Period

911.54

Memo Item

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 21 / 2016

Transaction ID : SB21B.I23131

Amount of Each Disbursement this Period

2.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. SOUTHWEST PUBLISHING & MAILING CORP**

Mailing Address 4000 SE ADAMS STREET

City TOPEKA State KS Zip Code 66609

Purpose of Disbursement  
DIRECT MAIL - NOT FEA

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 21 / 2016

Transaction ID : SB21B.I23140

Amount of Each Disbursement this Period

18150.05

Memo Item

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

19063.59

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. STEVE BROWN DM**

Mailing Address 3864 W MILLERS BRIDGE ROAD

City TALLAHASSEE State FL Zip Code 32312

Purpose of Disbursement  
DIRECT MAIL - NOT FEA

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 21 / 2016

Transaction ID : SB21B.I23141

Amount of Each Disbursement this Period

6831.94

Memo Item

Full Name (Last, First, Middle Initial)

**B. WILAND DIRECT INC.**

Mailing Address P.O. BOX 174480

City DENVER State CO Zip Code 80217

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 21 / 2016

Transaction ID : SB21B.I23146

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 22 / 2016

Transaction ID : SB21B.I23132

Amount of Each Disbursement this Period

27.20

Memo Item

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

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

7359.14

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 25 / 2016

Transaction ID : SB21B.I23133

Amount of Each Disbursement this Period

23.40

Memo Item

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 26 / 2016

Transaction ID : SB21B.I23134

Amount of Each Disbursement this Period

26.56

Memo Item

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 27 / 2016

Transaction ID : SB21B.I23135

Amount of Each Disbursement this Period

28.40

Memo Item

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

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

78.36

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. PIRYX**

Mailing Address **85 NATOMA STREET**

City **SAN FRANCISCO** State **CA** Zip Code **94105**

Purpose of Disbursement  
**CREDIT CARD PROCESSING FEE**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **01 / 28 / 2016**

**Transaction ID : SB21B.I23136**

Amount of Each Disbursement this Period: **18.80**

Memo Item

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

Mailing Address **85 NATOMA STREET**

City **SAN FRANCISCO** State **CA** Zip Code **94105**

Purpose of Disbursement  
**CREDIT CARD PROCESSING FEE**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **01 / 29 / 2016**

**Transaction ID : SB21B.I23137**

Amount of Each Disbursement this Period: **14.60**

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ **33.40**

**TOTAL** This Period (last page this line number only)..... ▶ **39025.82**

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. REPUBLICAN PARTY OF WISCONSIN - STATE ACCOUNT**

Mailing Address 148 E JOHNSON STREET

City MADISON State WI Zip Code 53703

Purpose of Disbursement  
REVERSAL OF OVERPAYMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Transaction ID : 021816MM

Amount of Each Disbursement this Period

1	4	0	8	.	0	0
---	---	---	---	---	---	---

Memo Item

REVERSAL OF OVER PAYMENT MADE ON 1/22/16

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

--	--	--	--	--	--	--

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

--	--	--	--	--	--	--

Memo Item

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

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

1	4	0	8	.	0	0
---	---	---	---	---	---	---

1	4	0	8	.	0	0
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. AMERICAN FUNDS SERVICE COMPANY**

Mailing Address BOX 6164

City INDIANAPOLIS State IN Zip Code 46206-6164

Purpose of Disbursement  
EMPLOYEE SIMPLE IRA

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Transaction ID : SB30B.I23111

Amount of Each Disbursement this Period

1082.34

Memo Item

Full Name (Last, First, Middle Initial)

**B. ASSURANT EMPLOYEE BENEFITS**

Mailing Address P.O. BOX 807009

City KANSAS CITY State MO Zip Code 64184

Purpose of Disbursement  
EMPLOYEE BENEFITS

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 08 / 2016

Transaction ID : SB30B.I23113

Amount of Each Disbursement this Period

325.94

Memo Item

Full Name (Last, First, Middle Initial)

**C. DELTA DENTAL**

Mailing Address P.O. BOX 828

City STEVENS POINT State WI Zip Code 54481

Purpose of Disbursement  
DENTAL INSURANCE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 08 / 2016

Transaction ID : SB30B.I23114

Amount of Each Disbursement this Period

313.46

Memo Item

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

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

1721.74

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. FORREST BARNWELL-HAYEMEYER**

Mailing Address 1105 W OUTER DRIVE

City OAK RIDGE State TN Zip Code 37830

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I23047**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. DAVID BREDEMUS**

Mailing Address 827 N 11TH STREET

City MILWAUKEE State WI Zip Code 53233

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I23050**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. PHILIP CURRY**

Mailing Address 131 W SILVER SPRING DRIVE

City WHITEFISH BAY State WI Zip Code 53217

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I23054**

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. DANA DAHMS**

Mailing Address 924 TENNY AVENUE

City WAUKESHA State WI Zip Code 53186

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I23056

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. RICHARD DICKIE**

Mailing Address 126 N. BLAIR ST. #1

City MADISON State WI Zip Code 53703

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I23058

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. MICHAEL DUFFEY**

Mailing Address 726 WINDSOR COURT

City WAUWATOSA State WI Zip Code 53226

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I23062

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. JOHN FOSTER**

Mailing Address 2416 E WASHINGTON AVENUE

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I23064

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. PATRICK GARRETT**

Mailing Address 11507 BROOKSHIRE DR.

City ORLAND PARK State IL Zip Code 60467

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I23066

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. PATRICK GEHL**

Mailing Address 1179 COLUMBUS CIRCLE

City JANESVILLE State WI Zip Code 53545

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I23068

Amount of Each Disbursement this Period

Memo Item

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

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. MARTHA GRAVLEE**

Mailing Address 2907 BIG TIMBER CIRCLE

City SUAMICO State WI Zip Code 54313

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Transaction ID : SB30B.I23070

Amount of Each Disbursement this Period

1	5	3	5	9	7
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**B. BENJAMIN HEATH**

Mailing Address 514 E WASHINGTON AVENUE

City MADISON State WI Zip Code 53703

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Transaction ID : SB30B.I23072

Amount of Each Disbursement this Period

1	3	3	7	1	6
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. DONNA HEIMBACH**

Mailing Address 3002 DIANNE DRIVE

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Transaction ID : SB30B.I23074

Amount of Each Disbursement this Period

4	9	5	6	6
---	---	---	---	---

Memo Item

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

3	3	6	8	7	9
---	---	---	---	---	---

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

3	3	6	8	7	9
---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. CARLTON HUFFMAN**

Mailing Address 2279 W PERSHING STREET

City APPLETON State WI Zip Code 54914

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.I23076**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. LARRY LOOMIS**

Mailing Address 762 BRIAR LN

City BELOIT State WI Zip Code 53511

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.I23080**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. SCOTT POOLE**

Mailing Address 1528 SELLERY STREET

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.I23082**

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. JASON RECTOR**

Mailing Address 1902 40TH AVENUE

City OSCEOLA State WI Zip Code 54020

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I23084**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. JAMES SAPP**

Mailing Address 134 FALLING WATERS LANE

City MAYLENE State AL Zip Code 35114

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I23088**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. WILLIAM SEXAUER**

Mailing Address 9023 COTSWALD WAY

City NEW PORT RICHEY State FL Zip Code 34655

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I23091**

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. CARL STOLTE**

Mailing Address 3519 ROMA LANE

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 15 / 2016

Transaction ID : SB30B.I23094

Amount of Each Disbursement this Period

122.38

Memo Item

Full Name (Last, First, Middle Initial)

**B. JOSHUA WILSON**

Mailing Address 641 W. MAIN STREET

City MADISON State WI Zip Code 53703

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 15 / 2016

Transaction ID : SB30B.I23096

Amount of Each Disbursement this Period

329.93

Memo Item

Full Name (Last, First, Middle Initial)

**C. JOSHUA ZDROIK**

Mailing Address 756 BUS LANE

City STEVENS POINT State WI Zip Code 54482

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 15 / 2016

Transaction ID : SB30B.I23098

Amount of Each Disbursement this Period

1143.45

Memo Item

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

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

1595.76

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)  
**A. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
01 / 15 / 2016

Transaction ID : **SB30B.I23100**

Amount of Each Disbursement this Period  
9245.06

Memo Item

Full Name (Last, First, Middle Initial)  
**B. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
01 / 15 / 2016

Transaction ID : **SB30B.I23101**

Amount of Each Disbursement this Period  
625.17

Memo Item

Full Name (Last, First, Middle Initial)  
**C. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
01 / 15 / 2016

Transaction ID : **SB30B.I23102**

Amount of Each Disbursement this Period  
10.83

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 9881.06

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City State Zip Code  
HAUPPAUGE NY 11788

Purpose of Disbursement  
PAYROLL PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I23103

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City State Zip Code  
HAUPPAUGE NY 11788

Purpose of Disbursement  
PAYROLL PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I23104

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN FUNDS SERVICE COMPANY**

Mailing Address BOX 6164

City State Zip Code  
INDIANAPOLIS IN 46206-6164

Purpose of Disbursement  
EMPLOYEE SIMPLE IRA

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I23112

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. KACY HACK**

Mailing Address 869 26 1/4 STREET

City CHETEK State WI Zip Code 54728

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 26 / 2016

Transaction ID : SB30B.I23079

Amount of Each Disbursement this Period

325.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. FORREST BARNWELL-HAYEMEYER**

Mailing Address 1105 W OUTER DRIVE

City OAK RIDGE State TN Zip Code 37830

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 29 / 2016

Transaction ID : SB30B.I23048

Amount of Each Disbursement this Period

1167.88

Memo Item

Full Name (Last, First, Middle Initial)

**C. FORREST BARNWELL-HAYEMEYER**

Mailing Address 1105 W OUTER DRIVE

City OAK RIDGE State TN Zip Code 37830

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 29 / 2016

Transaction ID : SB30B.I23049

Amount of Each Disbursement this Period

325.66

Memo Item

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

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

1818.54

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
MILEAGE EXPENSE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I23151**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. DAVID BREDEMUS**

Mailing Address 827 N 11TH STREET

City State Zip Code  
MILWAUKEE WI 53233

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I23051**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. DAVID BREDEMUS**

Mailing Address 827 N 11TH STREET

City State Zip Code  
MILWAUKEE WI 53233

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I23052**

Amount of Each Disbursement this Period

Memo Item

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

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
MILEAGE EXPENSE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I23153**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. NICHOLAS BURES**

Mailing Address

City State Zip Code

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I23053**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. PHILIP CURRY**

Mailing Address 131 W SILVER SPRING DRIVE

City State Zip Code  
WHITEFISH BAY WI 53217

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I23055**

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. DANA DAHMS**

Mailing Address 924 TENNY AVENUE

City WAUKESHA State WI Zip Code 53186

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 29 / 2016

Transaction ID : SB30B.I23057

Amount of Each Disbursement this Period

265.89

Memo Item

Full Name (Last, First, Middle Initial)

**B. RICHARD DICKIE**

Mailing Address 126 N. BLAIR ST. #1

City MADISON State WI Zip Code 53703

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 29 / 2016

Transaction ID : SB30B.I23059

Amount of Each Disbursement this Period

1202.77

Memo Item

Full Name (Last, First, Middle Initial)

**C. RICHARD DICKIE**

Mailing Address 126 N. BLAIR ST. #1

City MADISON State WI Zip Code 53703

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 29 / 2016

Transaction ID : SB30B.I23060

Amount of Each Disbursement this Period

61.81

Memo Item

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

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

1530.47

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. MICHAEL DUFFEY**

Mailing Address 726 WINDSOR COURT

City WAUWATOSA State WI Zip Code 53226

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 29 / 2016

Transaction ID : SB30B.I23063

Amount of Each Disbursement this Period

3287.12

Memo Item

Full Name (Last, First, Middle Initial)

**B. JOHN FOSTER**

Mailing Address 2416 E WASHINGTON AVENUE

City MADISON State WI Zip Code 53704

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 29 / 2016

Transaction ID : SB30B.I23065

Amount of Each Disbursement this Period

697.96

Memo Item

Full Name (Last, First, Middle Initial)

**C. PATRICK GARRETT**

Mailing Address 11507 BROOKSHIRE DR.

City ORLAND PARK State IL Zip Code 60467

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 29 / 2016

Transaction ID : SB30B.I23067

Amount of Each Disbursement this Period

1636.60

Memo Item

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

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

5621.68

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. PATRICK GEHL**

Mailing Address 1179 COLUMBUS CIRCLE

City JANESVILLE State WI Zip Code 53545

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I23069

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. MARTHA GRAVLEE**

Mailing Address 2907 BIG TIMBER CIRCLE

City SUAMICO State WI Zip Code 54313

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I23071

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. BENJAMIN HEATH**

Mailing Address 514 E WASHINGTON AVENUE

City MADISON State WI Zip Code 53703

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I23073

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. DONNA HEIMBACH**

Mailing Address 3002 DIANNE DRIVE

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 29 / 2016

Transaction ID : SB30B.I23075

Amount of Each Disbursement this Period

704.38

Memo Item

Full Name (Last, First, Middle Initial)

**B. CARLTON HUFFMAN**

Mailing Address 2279 W PERSHING STREET

City APPLETON State WI Zip Code 54914

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 29 / 2016

Transaction ID : SB30B.I23077

Amount of Each Disbursement this Period

1116.23

Memo Item

Full Name (Last, First, Middle Initial)

**C. CARLTON HUFFMAN**

Mailing Address 2279 W PERSHING STREET

City APPLETON State WI Zip Code 54914

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 29 / 2016

Transaction ID : SB30B.I23078

Amount of Each Disbursement this Period

99.95

Memo Item

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

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

1920.56

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
MILEAGE EXPENSE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I23159**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. LARRY LOOMIS**

Mailing Address 762 BRIAR LN

City State Zip Code  
BELOIT WI 53511

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I23081**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. SCOTT POOLE**

Mailing Address 1528 SELLERY STREET

City State Zip Code  
MIDDLETON WI 53562

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I23083**

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. JASON RECTOR**

Mailing Address 1902 40TH AVENUE

City OSCEOLA State WI Zip Code 54020

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I23085**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. HANNAH RIPKEY**

Mailing Address 1021 TARRANT DRIVE

City FONTANA State WI Zip Code 53125

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I23086**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. JAMES SAPP**

Mailing Address 134 FALLING WATERS LANE

City MAYLENE State AL Zip Code 35114

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.I23089**

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. JAMES SAPP**

Mailing Address 134 FALLING WATERS LANE

City MAYLENE State AL Zip Code 35114

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 29 / 2016

Transaction ID : SB30B.I23090

Amount of Each Disbursement this Period

82.20

Memo Item

Full Name (Last, First, Middle Initial)

**B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
MILEAGE EXPENSE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 29 / 2016

Transaction ID : SB30B.I23162

Amount of Each Disbursement this Period

82.20

Memo Item

Full Name (Last, First, Middle Initial)

**C. WILLIAM SEXAUER**

Mailing Address 9023 COTSWALD WAY

City NEW PORT RICHEY State FL Zip Code 34655

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 29 / 2016

Transaction ID : SB30B.I23092

Amount of Each Disbursement this Period

1141.64

Memo Item

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

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

1223.84



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. WILLIAM SEXAUER**

Mailing Address 9023 COTSWALD WAY

City NEW PORT RICHEY State FL Zip Code 34655

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 29 / 2016

Transaction ID : SB30B.I23093

Amount of Each Disbursement this Period

114.50

Memo Item

Full Name (Last, First, Middle Initial)

**B. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
MILEAGE EXPENSE

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 29 / 2016

Transaction ID : SB30B.I23163

Amount of Each Disbursement this Period

74.16

Memo Item

Full Name (Last, First, Middle Initial)

**C. CARL STOLTE**

Mailing Address 3519 ROMA LANE

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 29 / 2016

Transaction ID : SB30B.I23095

Amount of Each Disbursement this Period

170.84

Memo Item

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

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

285.34

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. JOSHUA WILSON**

Mailing Address 641 W. MAIN STREET

City MADISON State WI Zip Code 53703

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I23097

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. JOSHUA ZDROIK**

Mailing Address 756 BUS LANE

City STEVENS POINT State WI Zip Code 54482

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I23099

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.I23105

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 29 / 2016

Transaction ID : SB30B.I23106

Amount of Each Disbursement this Period

680.46

Memo Item

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement  
PAYROLL PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 29 / 2016

Transaction ID : SB30B.I23107

Amount of Each Disbursement this Period

10.83

Memo Item

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement  
PAYROLL PROCESSING FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 29 / 2016

Transaction ID : SB30B.I23108

Amount of Each Disbursement this Period

63.41

Memo Item

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

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

754.70

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City State Zip Code  
HAUPPAUGE NY 11788

Purpose of Disbursement  
PAYROLL PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 29 / 2016

Transaction ID : SB30B.I23109

Amount of Each Disbursement this Period

79.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City State Zip Code  
HAUPPAUGE NY 11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 29 / 2016

Transaction ID : SB30B.I23110

Amount of Each Disbursement this Period

1610.80

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Memo Item

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

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

1689.80

71911.41

**SCHEDULE H1 (FEC Form 3X)**

**METHOD OF ALLOCATION FOR:**

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

NAME OF COMMITTEE (In Full)  
 Republican Party of Wisconsin

Transaction ID : MCW021616A

**USE ONLY ONE SECTION, A or B**

**A. State and Local Party Committees**

**Fixed Percentage (select one)**

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

**B. Separate Segregated Funds and Nonconnected Committees**

**Flat Minimum Federal Percentage**

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

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

Federal.....  %  
 Nonfederal .....  %

This ratio applies to (check all that apply):

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

**SCHEDULE H3 (FEC Form 3X)  
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

NAME OF ACCOUNT REPUBLICAN PARTY OF WISCONSIN - STATE ACCOUNT	DATE OF RECEIPT MM / DD / YYYY 01 / 08 / 2016	TOTAL AMOUNT TRANSFERRED 16450.99
--	---	--------------------------------------

**BREAKDOWN OF TRANSFER RECEIVED**

i) <b>Total Administrative</b> .....	16450.99
<b>Transaction ID : 021616A</b>	
ii) <b>Generic Voter Drive</b> .....	
iii) <b>Exempt Activities</b> .....	
iv) <b>Direct Fundraising</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
v) <b>Direct Candidate Support</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support .....	
vi) <b>Public Communications Referring Only to Party</b> (Made by PAC) .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 Republican Party of Wisconsin

NAME OF ACCOUNT REPUBLICAN PARTY OF WISCONSIN - STATE ACCOUNT	DATE OF RECEIPT MM / DD / YYYY 01 / 22 / 2016	TOTAL AMOUNT TRANSFERRED 7628.34
--	---	-------------------------------------

**BREAKDOWN OF TRANSFER RECEIVED**

i) <b>Total Administrative</b> .....	7628.34
<b>Transaction ID : 021616B</b>	
ii) <b>Generic Voter Drive</b> .....	
iii) <b>Exempt Activities</b> .....	
iv) <b>Direct Fundraising</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
v) <b>Direct Candidate Support</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) <b>Public Communications Referring Only to Party</b> (Made by PAC) .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	24079.33
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred).....	24079.33

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

**A. Full Name (Last, First, Middle Initial) Transaction ID : 021616E**  Memo Item

**Aspect Consulting, LLC**

Mailing Address 8401 Excelsior Drive

City Madison State WI Zip Code 53717

Purpose of Disbursement: COMPLIANCE CONSULTING

Activity or Event Identifier:

Allocated Activity or Event:  Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 6000.00

Date: 01 / 08 / 2016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2160.00		3840.00		6000.00

**B. Full Name (Last, First, Middle Initial) Transaction ID : 021616F**  Memo Item

**Atchley & Associates, LLP**

Mailing Address 6850 Austin Center Boulevard

City Austin State TX Zip Code 78731

Purpose of Disbursement: HUMAN RESOURCES CONSULTING

Activity or Event Identifier:

Allocated Activity or Event:  Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 12554.74

Date: 01 / 08 / 2016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2359.71		4195.03		6554.74

**C. Full Name (Last, First, Middle Initial) Transaction ID : 021616G**  Memo Item

**Badgerland Chemical & Supply, Inc**

Mailing Address 8505 University Green

City Middleton State WI Zip Code 53562

Purpose of Disbursement: CLEANING SUPPLIES

Activity or Event Identifier:

Allocated Activity or Event:  Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 12724.09

Date: 01 / 08 / 2016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
60.97		108.38		169.35

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4580.68		8143.41		12724.09

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

**A. Full Name (Last, First, Middle Initial) Transaction ID : 021616H**  Memo Item

**Best Buds LLC**

Mailing Address 348 Woodland Circle

City Madison State WI Zip Code 53704

Purpose of Disbursement: SNOW REMOVAL

Activity or Event Identifier:

Allocated Activity or Event:  Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 13054.09

Date: 01 / 08 / 2016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
118.80		211.20		330.00

**B. Full Name (Last, First, Middle Initial) Transaction ID : 021616I**  Memo Item

**BK-DSI, LLC**

Mailing Address 405 Doral Court

City Waunakee State WI Zip Code 53597

Purpose of Disbursement: DATA SERVICES

Activity or Event Identifier:

Allocated Activity or Event:  Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 18974.09

Date: 01 / 08 / 2016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2131.20		3788.80		5920.00

**C. Full Name (Last, First, Middle Initial) Transaction ID : 021616J**  Memo Item

**CITY TREASURER**

Mailing Address P.O. Box 2997

City Madison State WI Zip Code 53701

Purpose of Disbursement: UTILITIES

Activity or Event Identifier:

Allocated Activity or Event:  Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 19070.04

Date: 01 / 08 / 2016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.54		61.41		95.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2284.54		4061.41		6345.95

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

**A. Full Name (Last, First, Middle Initial) Transaction ID : 021616K**  Memo Item

**Coca Cola Enterprises**

Mailing Address 2335 Paysphere Circle

City Chicago State IL Zip Code 60674

Purpose of Disbursement: OFFICE SODA

Activity or Event Identifier:

Allocated Activity or Event:  Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 19091.14

Date: 01 / 08 / 2016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.60		13.50		21.10

**B. Full Name (Last, First, Middle Initial) Transaction ID : 021616L**  Memo Item

**FLS Connect**

Mailing Address 7300 Hudson Blvd, Suite 270

City St. Paul State MN Zip Code 55128

Purpose of Disbursement: CONFERENCE CALLS

Activity or Event Identifier:

Allocated Activity or Event:  Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 19442.44

Date: 01 / 08 / 2016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
126.47		224.83		351.30

**C. Full Name (Last, First, Middle Initial) Transaction ID : 021616M**  Memo Item

**Konica Minolta Premier Finance**

Mailing Address PO Box 740423

City Atlanta State GA Zip Code 30374

Purpose of Disbursement: COPIER LEASE

Activity or Event Identifier:

Allocated Activity or Event:  Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 20875.72

Date: 01 / 08 / 2016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
515.98		917.30		1433.28

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
650.05		1155.63		1805.68

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

**A. Full Name (Last, First, Middle Initial) Transaction ID : 021616N**  Memo Item

**Lind Weinger LLC**

Mailing Address 8020 Excelsior Drive #402

City Madison State WI Zip Code 53717

Purpose of Disbursement: LEGAL SERVICES

Activity or Event Identifier:

Allocated Activity or Event:  Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 21875.72

Date: 01 / 08 / 2016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
360.00		640.00		1000.00

**B. Full Name (Last, First, Middle Initial) Transaction ID : 021616O**  Memo Item

**Madison Gas and Electric**

Mailing Address PO Box 1231

City Madison State WI Zip Code 53701

Purpose of Disbursement: UTILITIES

Activity or Event Identifier:

Allocated Activity or Event:  Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 22863.95

Date: 01 / 08 / 2016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
355.76		632.47		988.23

**C. Full Name (Last, First, Middle Initial) Transaction ID : 021616P**  Memo Item

**Orkin Exterminating**

Mailing Address PO Box 6218

City Madison State WI Zip Code 53716

Purpose of Disbursement: OFFICE MAINTENANCE

Activity or Event Identifier:

Allocated Activity or Event:  Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 22918.95

Date: 01 / 08 / 2016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.80		35.20		55.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
735.56		1307.67		2043.23

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : 021616Q</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Pitney Bowes Global Financial Services, Mailing Address PO Box 371887			Allocated Activity or Event Year-To-Date 23723.65			
City Pittsburgh	State PA	Zip Code 15250	Date: MM / DD / YYYY 01 / 08 / 2016			
Purpose of Disbursement: OFFICE SUPPLIES		Category/ Type	Allocated Activity or Event Year-To-Date 23723.65			
Activity or Event Identifier:			Date: MM / DD / YYYY 01 / 08 / 2016			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
289.69			515.01			804.70

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : 021616R</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Pro One Janitorial, Inc. Mailing Address 1101 Ashwaubenon St.			Allocated Activity or Event Year-To-Date 24223.65			
City Green Bay	State WI	Zip Code 54304	Date: MM / DD / YYYY 01 / 08 / 2016			
Purpose of Disbursement: JANITORIAL SERVICES		Category/ Type	Allocated Activity or Event Year-To-Date 24223.65			
Activity or Event Identifier:			Date: MM / DD / YYYY 01 / 08 / 2016			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
180.00			320.00			500.00

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : 021616S</b> <input type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
TDS Metrocom Mailing Address PO Box 94510			Allocated Activity or Event Year-To-Date 24564.16			
City Palatine	State IL	Zip Code 60094	Date: MM / DD / YYYY 01 / 08 / 2016			
Purpose of Disbursement: OFFICE PHONES		Category/ Type	Allocated Activity or Event Year-To-Date 24564.16			
Activity or Event Identifier:			Date: MM / DD / YYYY 01 / 08 / 2016			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
122.58			217.93			340.51

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
592.27		1052.94		1645.21

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[Empty]	[Empty]	[Empty]

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

**A. Full Name (Last, First, Middle Initial) Transaction ID : 021616T**  Memo Item

**TDS Metrocom**

Mailing Address PO Box 94510

City Palatine State IL Zip Code 60094

Purpose of Disbursement: OFFICE PHONES

Activity or Event Identifier:

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 25704.67

Date: 01 / 08 / 2016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
410.58		729.93		1140.51

**B. Full Name (Last, First, Middle Initial) Transaction ID : 021616U**  Memo Item

**ADVANCED DISPOSAL**

Mailing Address PO Box 74008053

City Chicago State IL Zip Code 60674

Purpose of Disbursement: WASTE REMOVAL

Activity or Event Identifier:

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 25928.83

Date: 01 / 22 / 2016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
80.70		143.46		224.16

**C. Full Name (Last, First, Middle Initial) Transaction ID : 021616V**  Memo Item

**BMO Harris Bank**

Mailing Address PO Box 3052

City Milwaukee State WI Zip Code 53201

Purpose of Disbursement: CREDIT CARD PAYMENT

Activity or Event Identifier:

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 27779.41

Date: 01 / 22 / 2016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
666.21		1184.37		1850.58

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1157.49		2057.76		3215.25

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

**A. Full Name (Last, First, Middle Initial) Transaction ID : 021616W**  Memo Item

**Century Springs Bottling Co.**

Mailing Address PO Box 856858

City Minneapolis State MN Zip Code 55485

Purpose of Disbursement: OFFICE WATER

Activity or Event Identifier:

Allocated Activity or Event:  Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 27840.41

Date: 01 / 22 / 2016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.96		39.04		61.00

**B. Full Name (Last, First, Middle Initial) Transaction ID : 021616X**  Memo Item

**Coca Cola Enterprises**

Mailing Address 2335 Paysphere Circle

City Chicago State IL Zip Code 60674

Purpose of Disbursement: OFFICE SODA

Activity or Event Identifier:

Allocated Activity or Event:  Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 27861.51

Date: 01 / 22 / 2016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.60		13.50		21.10

**C. Full Name (Last, First, Middle Initial) Transaction ID : 021616Y**  Memo Item

**Easy Permit Postage Pitney Bowes**

Mailing Address PO Box 371874

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement: POSTAGE FOR METER

Activity or Event Identifier:

Allocated Activity or Event:  Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 30120.22

Date: 01 / 22 / 2016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
813.14		1445.57		2258.71

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
842.70		1498.11		2340.81

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Transaction ID : 021616Z
FLS Connect
Mailing Address 7300 Hudson Blvd, Suite 270
City St. Paul State MN Zip Code 55128
Purpose of Disbursement: CONFERENCE CALLS
Activity or Event Identifier:
Allocated Activity or Event: Administrative [X] Fundraising [ ] Exempt [ ]
Voter Drive [ ] Direct Candidate Support [ ]
Public Comm (ref to party only) by PAC [ ]
Allocated Activity or Event Year-To-Date 30187.95
Date 01 / 22 / 2016
FEDERAL SHARE 24.38 + NONFEDERAL SHARE 43.35 = TOTAL AMOUNT 67.73

B. Full Name (Last, First, Middle Initial) Transaction ID : 021616AA
LexisNexis
Mailing Address PO BOX 2314
City Carol Stream State IL Zip Code 60132
Purpose of Disbursement: SOFTWARE SUBSCRIPTION
Activity or Event Identifier:
Allocated Activity or Event: Administrative [X] Fundraising [ ] Exempt [ ]
Voter Drive [ ] Direct Candidate Support [ ]
Public Comm (ref to party only) by PAC [ ]
Allocated Activity or Event Year-To-Date 30623.95
Date 01 / 22 / 2016
FEDERAL SHARE 156.96 + NONFEDERAL SHARE 279.04 = TOTAL AMOUNT 436.00

C. Full Name (Last, First, Middle Initial) Transaction ID : 021616AB
Dan Morse Consulting LLC
Mailing Address 5205 Barton Road
City Madison State WI Zip Code 53711
Purpose of Disbursement: FUNDRAISING CONSULTING - NOT FEA
Activity or Event Identifier:
Allocated Activity or Event: Administrative [ ] Fundraising [X] Exempt [ ]
Voter Drive [ ] Direct Candidate Support [ ]
Public Comm (ref to party only) by PAC [ ]
Allocated Activity or Event Year-To-Date 35423.95
Date 01 / 22 / 2016
FEDERAL SHARE 1728.00 + NONFEDERAL SHARE 3072.00 = TOTAL AMOUNT 4800.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 1909.34, 3394.39, 5303.73

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [ ], [ ], [ ]

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : 021916A</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
OFFICE DEPOT Mailing Address 7341 West Towne Way			Allocated Activity or Event Year-To-Date 35555.18			
City Madison	State WI	Zip Code 53719	Date: MM / DD / YYYY 11 / 12 / 2015			
Purpose of Disbursement: OFFICE SUPPLIES		Category/ Type	Allocated Activity or Event Year-To-Date 35555.18			
Activity or Event Identifier:			Date: MM / DD / YYYY 11 / 12 / 2015			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
47.24			83.99			131.23

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : 021916B</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
INTUIT Mailing Address 2700 Coast Avenue			Allocated Activity or Event Year-To-Date 35574.68			
City Mountain View	State CA	Zip Code 94043	Date: MM / DD / YYYY 11 / 17 / 2015			
Purpose of Disbursement: SOFTWARE SUBSCRIPTION		Category/ Type	Allocated Activity or Event Year-To-Date 35574.68			
Activity or Event Identifier:			Date: MM / DD / YYYY 11 / 17 / 2015			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
7.02			12.48			19.50

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : 021916C</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
AMAZON Mailing Address 410 Terry Avenue N			Allocated Activity or Event Year-To-Date 35581.44			
City Seattle	State WA	Zip Code 98109	Date: MM / DD / YYYY 11 / 17 / 2015			
Purpose of Disbursement: OFFICE SUPPLIES		Category/ Type	Allocated Activity or Event Year-To-Date 35581.44			
Activity or Event Identifier:			Date: MM / DD / YYYY 11 / 17 / 2015			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
2.43			4.33			6.76

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

**A.** Full Name (Last, First, Middle Initial) **Transaction ID : 021916D**  Memo Item

**AMAZON**

Mailing Address 410 Terry Avenue N

City State Zip Code  
Seattle WA 98109

Purpose of Disbursement:  
OFFICE SUPPLIES

Activity or Event Identifier:

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
35592.50

Date M M / D D / Y Y Y Y Y Y  
11 / 18 / 2015

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.98		7.08		11.06

**B.** Full Name (Last, First, Middle Initial) **Transaction ID : 021916E**  Memo Item

**AMAZON**

Mailing Address 410 Terry Avenue N

City State Zip Code  
Seattle WA 98109

Purpose of Disbursement:  
OFFICE SUPPLIES

Activity or Event Identifier:

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
35614.92

Date M M / D D / Y Y Y Y Y Y  
11 / 18 / 2015

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.07		14.35		22.42

**C.** Full Name (Last, First, Middle Initial) **Transaction ID : 021916F**  Memo Item

**AMAZON**

Mailing Address 410 Terry Avenue N

City State Zip Code  
Seattle WA 98109

Purpose of Disbursement:  
OFFICE SUPPLIES

Activity or Event Identifier:

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
35633.82

Date M M / D D / Y Y Y Y Y Y  
11 / 18 / 2015

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.80		12.10		18.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

**A.** Full Name (Last, First, Middle Initial) **Transaction ID : 021916G**  Memo Item

**AMAZON**

Mailing Address 410 Terry Avenue N

City State Zip Code  
Seattle WA 98109

Purpose of Disbursement: OFFICE SUPPLIES

Activity or Event Identifier:

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 35638.71

Date: 11 / 18 / 2015

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.76		3.13		4.89

**B.** Full Name (Last, First, Middle Initial) **Transaction ID : 021916H**  Memo Item

**AMAZON**

Mailing Address 410 Terry Avenue N

City State Zip Code  
Seattle WA 98109

Purpose of Disbursement: OFFICE SUPPLIES

Activity or Event Identifier:

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 35643.49

Date: 11 / 18 / 2015

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.72		3.06		4.78

**C.** Full Name (Last, First, Middle Initial) **Transaction ID : 021916I**  Memo Item

**Office Depot**

Mailing Address 515 Kehoe Boulevard

City State Zip Code  
Carol Stream IL 60188

Purpose of Disbursement: OFFICE SUPPLIES

Activity or Event Identifier:

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 35761.61

Date: 11 / 20 / 2015

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.52		75.60		118.12

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

**A.** Full Name (Last, First, Middle Initial) **Transaction ID : 021916K**  Memo Item

**AMAZON**

Mailing Address 410 Terry Avenue N

City State Zip Code  
Seattle WA 98109

Purpose of Disbursement:  
OFFICE SUPPLIES

Activity or Event Identifier:

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
35801.29

Date  /  /

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.28		25.40		39.68

**B.** Full Name (Last, First, Middle Initial) **Transaction ID : 021916L**  Memo Item

**Target**

Mailing Address 4301 Lien Road

City State Zip Code  
Madison WI 53704

Purpose of Disbursement:  
OFFICE SUPPLIES

Activity or Event Identifier:

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
35924.71

Date  /  /

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.43		78.99		123.42

**C.** Full Name (Last, First, Middle Initial) **Transaction ID : 021916M**  Memo Item

**CMDI**

Mailing Address 1593 Spring Hill Road

City State Zip Code  
Tysons Corner VA 22182

Purpose of Disbursement:  
SOFTWARE SUBSCRIPTION

Activity or Event Identifier:

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
36827.21

Date  /  /

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
324.90		577.60		902.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : 021916N</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
<b>MICROSOFT</b> Mailing Address 1 Microsoft Way			Allocated Activity or Event Year-To-Date 36853.59			
City Redmond	State WA	Zip Code 98052	Date: MM / DD / YYYY 12 / 04 / 2015			
Purpose of Disbursement: SOFTWARE SUBSCRIPTION		Category/ Type	Allocated Activity or Event Year-To-Date 36853.59			
Activity or Event Identifier:			Date: MM / DD / YYYY 12 / 04 / 2015			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
9.50			16.88			26.38

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : 021916O</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
<b>MICROSOFT</b> Mailing Address 1 Microsoft Way			Allocated Activity or Event Year-To-Date 37033.85			
City Redmond	State WA	Zip Code 98052	Date: MM / DD / YYYY 12 / 04 / 2015			
Purpose of Disbursement: SOFTWARE SUBSCRIPTION		Category/ Type	Allocated Activity or Event Year-To-Date 37033.85			
Activity or Event Identifier:			Date: MM / DD / YYYY 12 / 04 / 2015			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
64.89			115.37			180.26

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : 021916P</b> <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
<b>WALL STREET JOURNAL</b> Mailing Address 1211 Avenue of the Americas			Allocated Activity or Event Year-To-Date 37062.84			
City New York	State NY	Zip Code 10036	Date: MM / DD / YYYY 12 / 05 / 2015			
Purpose of Disbursement: SUBSCRIPTION		Category/ Type	Allocated Activity or Event Year-To-Date 37062.84			
Activity or Event Identifier:			Date: MM / DD / YYYY 12 / 05 / 2015			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
10.44			18.55			28.99

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
0.00	0.00	0.00

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

**A.** Full Name (Last, First, Middle Initial) **Transaction ID : 021916Q**  Memo Item

**Office Depot**

Mailing Address 515 Kehoe Boulevard

City State Zip Code  
Carol Stream IL 60188

Purpose of Disbursement: OFFICE SUPPLIES

Activity or Event Identifier:

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 37231.62

Date: 12 / 07 / 2015

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
60.76		108.02		168.78

**B.** Full Name (Last, First, Middle Initial) **Transaction ID : 021916R**  Memo Item

**Office Depot**

Mailing Address 4016 E Washington Avenue

City State Zip Code  
Madison WI 53704

Purpose of Disbursement: OFFICE SUPPLIES

Activity or Event Identifier:

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 37274.53

Date: 12 / 09 / 2015

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.45		27.46		42.91

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

Mailing Address

City State Zip Code

Purpose of Disbursement:

Activity or Event Identifier:

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date:

Date:

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
12752.63	22671.32	35423.95