

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.
Republican Party of Wisconsin

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

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 / /

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

**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="2015"/>	<input type="text" value="433732.60"/>	<input type="text" value="433732.60"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="399126.21"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="143239.39"/>	<input type="text" value="749324.02"/>
(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="542365.60"/>	<input type="text" value="1183056.62"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="147437.81"/>	<input type="text" value="783128.17"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="394927.79"/>	<input type="text" value="399928.45"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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).....	14045.75	65855.75
(ii) Unitemized	92004.61	413913.03
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	106050.36	479768.78
(b) Political Party Committees	6100.00	12200.00
(c) Other Political Committees (such as PACs).....	20500.00	171868.26
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	132650.36	663837.04
12. Transfers From Affiliated/Other Party Committees.....	0.00	12200.00
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).....	0.00	21795.65
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).....	10589.03	51491.33
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	10589.03	51491.33
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	143239.39	749324.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	132650.36	697832.69

DETAILED SUMMARY PAGE
of Disbursements

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	1868.67	9088.43
(ii) Non-Federal Share.....	10589.03	51500.89
(b) Other Federal Operating Expenditures	82071.16	491456.57
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	94528.86	552045.89
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).....	2000.00	2000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	2000.00	2000.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	50908.95	229082.28
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	50908.95	229082.28
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	147437.81	783128.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	136848.78	731627.28

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)	132650.36	663837.04
34. Total Contribution Refunds (from Line 28(d))	2000.00	2000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	130650.36	661837.04
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	83939.83	500545.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	21795.65
38. Net Operating Expenditures (subtract Line 37 from Line 36)	83939.83	478749.35

**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 115
(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

A. THOMAS A. GIGUERE
 Full Name (Last, First, Middle Initial)
 Mailing Address W10037 290TH AVE
 City HAGER CITY State WI Zip Code 54014-8346
 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
 04 / 01 / 2015
Transaction ID : SA11.972311
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. JIM HERSHEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 12467 FALCON RD
 City SPARTA State WI Zip Code 54656-3577
 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 ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 01 / 2015
Transaction ID : SA11.972279
 Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

C. TIM M LYBERT
 Full Name (Last, First, Middle Initial)
 Mailing Address N1293 COUNTY ROAD HH
 City FREMONT State WI Zip Code 54940-8747
 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
 04 / 01 / 2015
Transaction ID : SA11.972329
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
TOTAL This Period (last page this line number only)..... ▶

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

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 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. KAREN E. COWAN

Mailing Address **877 S 16TH CT
B 4**

City **STURGEON BAY** State **WI** Zip Code **54235-1500**

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 ▼ **400.00**

Date of Receipt
04 / 02 / 2015
Transaction ID : SA11.971375

Amount of Each Receipt this Period
100.00

CONTRIBUTION

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

Mailing Address **13731 HICKMAN ROAD UNIT 3407**

City **URBANDALE** State **IA** Zip Code **50323-2199**

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 ▼ **1050.00**

Date of Receipt
04 / 02 / 2015
Transaction ID : SA11.971525

Amount of Each Receipt this Period
300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. BRENT M. WOGAHN

Mailing Address **3702 TIMBER TRAILS COURT**

City **EAU CLAIRE** State **WI** Zip Code **54701-9001**

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

Name of Employer **EVERGREEN SURGICAL** Occupation **SURGEON**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
04 / 02 / 2015
Transaction ID : SA11.971222

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► **900.00**

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

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)
A. LESLIE CHASE

Mailing Address **S79W16511 WOODS RD**

City **MUSKEGO** State **WI** Zip Code **53150-9781**

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
04 / 03 / 2015
Transaction ID : SA11.972340

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. DANIEL HART

Mailing Address **N81W13599 GOLFWAY DR**

City **MENOMONEE FALLS** State **WI** Zip Code **53051-7244**

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
04 / 03 / 2015
Transaction ID : SA11.972347

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

Mailing Address **13731 HICKMAN ROAD UNIT 3407**

City **URBANDALE** State **IA** Zip Code **50323-2199**

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 ▼ **1050.00**

Date of Receipt
04 / 03 / 2015
Transaction ID : SA11.971526

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **1000.00**

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

**SCHEDULE A (FEC Form 3X)
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 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. CHARLES MATTHEWS

Mailing Address **321 GRAND AVENUE**

City State Zip Code
WAUKEGAN IL 60085-4224

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

Name of Employer Occupation
MATTHEWS PROFESSIONAL EMPLOYMENT PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt
04 / 03 / 2015

Transaction ID : SA11.971512

Amount of Each Receipt this Period
350.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. BARBARA B. PAULL

Mailing Address **95 SKIDAWAY ISLAND PARK RD UNIT 13**

City State Zip Code
SAVANNAH GA 31411-1118

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 ▼
350.00

Date of Receipt
04 / 03 / 2015

Transaction ID : SA11.971250

Amount of Each Receipt this Period
150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MARGARET M. RENDALL

Mailing Address **6710 BRAUN ROAD**

City State Zip Code
MOUNT PLEASANT WI 53403-9414

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 ▼
210.00

Date of Receipt
04 / 06 / 2015

Transaction ID : SA11.971620

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **550.00**

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

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

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

Mailing Address **N8462 BOOTH LAKE HEIGHTS ROAD**

City **EAST TROY** State **WI** Zip Code **53120-**

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

Name of Employer **SELF EMPLOYED** Occupation **DENTIST**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
04 / 07 / 2015
Transaction ID : SA11.971648

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. CORY HAAS

Mailing Address **N14582 COUNTY ROAD M**

City **THORP** State **WI** Zip Code **54771-7407**

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

Name of Employer **HAAS SONS, INC** Occupation **ROAD CONSTRUCTION**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
04 / 07 / 2015
Transaction ID : SA11.971661

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. GERALD K. MCCOY

Mailing Address **6945 WEST SURREY AVENUE**

City **PEORIA** State **AZ** Zip Code **85381-5011**

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 ▼ **650.00**

Date of Receipt
04 / 07 / 2015
Transaction ID : SA11.971817

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **600.00**

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

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

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FOR LINE NUMBER: PAGE 11 OF 115
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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. ANITA M. SORENSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3076 EDENBERRY STREET
 City FIRCHBURG State WI Zip Code 53711-6955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FOLEY AND LARDNER, LLP Occupation LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 09 / 2015
Transaction ID : SA11.971833
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

B. MIRIAM B. HUTH
 Full Name (Last, First, Middle Initial)
 Mailing Address 475 - 4TH FARIWAY DRIVE
 City ROSWELL State GA Zip Code 30076-3565
 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 ▼ 520.00

Date of Receipt 04 / 10 / 2015
Transaction ID : SA11.971917
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

C. MRS. SUSAN PETERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2821 N POLZIN ROAD
 City JANESVILLE State WI Zip Code 53548-9394
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation MUSIC TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.75

Date of Receipt 04 / 14 / 2015
Transaction ID : SA11.972042
 Amount of Each Receipt this Period 101.75
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 301.75
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 115
	<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. MRS. MARION J. ADLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 10200 W BLUEMOUND ROAD
 APT 807
 City WAUWATOSA State WI Zip Code 53226-4358
 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 ▼ 205.00

Date of Receipt 04 / 16 / 2015
Transaction ID : SA11.972468
 Amount of Each Receipt this Period 40.00
 CONTRIBUTION

B. GRANT DENSING
 Full Name (Last, First, Middle Initial)
 Mailing Address 2520 JODON COURT
 City BROOKFIELD State WI Zip Code 53005-4506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DENSING REALTY Occupation OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 21 / 2015
Transaction ID : SA11.972797
 Amount of Each Receipt this Period 200.00
 CONTRIBUTION

C. WALTER R. SCHWARTZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 8220 HARWOOD AVENUE # 338
 City WAUWATOSA State WI Zip Code 53213-2580
 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 ▼ 225.00

Date of Receipt 04 / 21 / 2015
Transaction ID : SA11.972637
 Amount of Each Receipt this Period 50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	290.00
TOTAL This Period (last page this line number only).....▶	

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

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FOR LINE NUMBER: PAGE 13 OF 115
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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. MS. JOYCE A. SIEFERING
 Full Name (Last, First, Middle Initial)
 Mailing Address 2925 FOREST DOWN
 City FITCHBURG State WI Zip Code 53711-5294
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RUNLEE MANAGEMENT Occupation REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 21 / 2015
Transaction ID : SA11.972998
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

B. RONALD SIX
 Full Name (Last, First, Middle Initial)
 Mailing Address 2601 TOUCHMARK DR UNIT 325
 City APPLETON State WI Zip Code 54914-8790
 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 ▼ 315.00

Date of Receipt 04 / 21 / 2015
Transaction ID : SA11.972863
 Amount of Each Receipt this Period 105.00
 CONTRIBUTION

C. MR. WILLIAM O. BRACHMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 10101 CEDAR CREEK RD
 City CEDARBURG State WI Zip Code 53012-9757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 23 / 2015
Transaction ID : SA11.973259
 Amount of Each Receipt this Period 50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 405.00
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 115
(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. MARVIN HOELZEL

Mailing Address **815 RAY ST**

City **LAKE MILLS** State **WI** Zip Code **53551-1064**

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
04 / 23 / 2015

Transaction ID : SA11.973217

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MIRIAM B. HUTH

Mailing Address **475 - 4TH FARIWAY DRIVE**

City **ROSWELL** State **GA** Zip Code **30076-3565**

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 ▼
520.00

Date of Receipt
04 / 23 / 2015

Transaction ID : SA11.973155

Amount of Each Receipt this Period
60.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MIRIAM B. HUTH

Mailing Address **475 - 4TH FARIWAY DRIVE**

City **ROSWELL** State **GA** Zip Code **30076-3565**

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 ▼
520.00

Date of Receipt
04 / 23 / 2015

Transaction ID : SA11.973156

Amount of Each Receipt this Period
260.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **820.00**

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 15 OF 115
(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. WILLIAM KLUG

Mailing Address **N2426 CHERRY RD**

City **RUBICON** State **WI** Zip Code **53078-9617**

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 ▼ **400.00**

Date of Receipt
04 / 23 / 2015
Transaction ID : SA11.973135

Amount of Each Receipt this Period
150.00

CONTRIBUTION

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

Mailing Address **724 E GRINNELL DR**

City **BURBANK** State **CA** Zip Code **91501-1720**

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

Name of Employer **DOJ OF CALIFORNIA** Occupation **LAWYER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
04 / 23 / 2015
Transaction ID : SA11.973258

Amount of Each Receipt this Period
75.00

CONTRIBUTION

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

Mailing Address **P.O. BOX 5066**

City **MILWAUKEE** State **WI** Zip Code **53201-5066**

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **504.00**

Date of Receipt
04 / 23 / 2015
Transaction ID : SA11.975591

Amount of Each Receipt this Period
504.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► **729.00**

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 16 OF 115
(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. RICHARD C. MARX

Mailing Address P.O. BOX 440

City State Zip Code
WAPPINGERS FALLS NY 12590-0440

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 ▼
315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2015
Transaction ID : SA11.973273

Amount of Each Receipt this Period
105.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MARY NEWTON

Mailing Address 607 E TAYLOR RUN PKWY

City State Zip Code
ALEXANDRIA VA 22314-4929

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 ▼
900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2015
Transaction ID : SA11.973315

Amount of Each Receipt this Period
225.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. DOWE S. TILLEMA

Mailing Address 606 17TH STREET

City State Zip Code
MOSINEE WI 54455-1031

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

Name of Employer Occupation
EASTBAY INC. OPERATIONAL PROFESSIONAL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2015
Transaction ID : SA11.973287

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 430.00

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 17 OF 115
(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. RAYMOND W. DAY

Mailing Address **2343 S MAIN STREET**

City **WAHINGTON** State **PA** Zip Code **15301-3257**

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

Name of Employer Occupation
SELF EMPLOYED **FARMER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
04 / 27 / 2015
Transaction ID : SA11.973408

Amount of Each Receipt this Period
70.00

CONTRIBUTION

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

Mailing Address **4045 S 54TH STREET**

City **MILWAUKEE** State **WI** Zip Code **53220-2613**

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 ▼
330.00

Date of Receipt
04 / 27 / 2015
Transaction ID : SA11.973421

Amount of Each Receipt this Period
75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. LUCIA B. WILSON

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 Occupation
RETIRED **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
04 / 27 / 2015
Transaction ID : SA11.973414

Amount of Each Receipt this Period
350.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **495.00**

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 18 OF 115
(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. SARAH J. BLOCKHUS

Mailing Address **E2480 QUAIL RUN ROAD**

City **EAU CLAIRE** State **WI** Zip Code **54701-9451**

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
04 / 28 / 2015
Transaction ID : SA11.973699

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. DANIEL S FINET

Mailing Address **N3994 COUNTY ROAD C**

City **DARIEN** State **WI** Zip Code **53114-1239**

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
04 / 28 / 2015
Transaction ID : SA11.974218

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

Mailing Address **17401 SOUTHEAST 39TH STREET, UNIT**

City **VANCOUVER** State **WA** Zip Code **98683-9426**

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
04 / 28 / 2015
Transaction ID : SA11.973577

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► **1000.00**

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 19 OF 115
(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. STEPHEN MOSLING

Mailing Address **6075 PELICAN BAY BOULEVARD APT 12**

City **NAPLES** State **FL** Zip Code **34108-7114**

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

Name of Employer **N/A** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
04 / 28 / 2015
Transaction ID : SA11.973701

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. CORINNE SPENCE

Mailing Address **2921 LAUREL DR**

City **SACRAMENTO** State **CA** Zip Code **95864-4957**

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 ▼ **2500.00**

Date of Receipt
04 / 29 / 2015
Transaction ID : SA11.974242

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

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

Mailing Address **2448 S 102ND ST**

City **MILWAUKEE** State **WI** Zip Code **53227-2466**

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
04 / 29 / 2015
Transaction ID : SA11.974406

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **3550.00**

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 20 OF 115
(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. HERBERT ALAN LEVIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 724 E GRINNELL DR
 City State Zip Code
 BURBANK CA 91501-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 DOJ OF CALIFORNIA LAWYER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2015
Transaction ID : SA11.974059
 Amount of Each Receipt this Period
 75.00
 CONTRIBUTION

B. MARISA B. MINOTTE
 Full Name (Last, First, Middle Initial)
 Mailing Address 4040 GLENWAY CT
 City State Zip Code
 MILWAUKEE WI 53222-1161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF SELF
 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
 04 / 30 / 2015
Transaction ID : SA11.974368
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. GREGG OLSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1059 E IRON EAGLE DR
 City State Zip Code
 EAGLE ID 83616-6855
 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
 04 / 30 / 2015
Transaction ID : SA11.974223
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 675.00
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 21 OF 115
(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. KAREN REISENAUER

Mailing Address 5504 CAMBRIDGE LANE UNIT 3

City State Zip Code
MOUNT PLEASANT WI 53406-2877

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 ▼
565.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 30 / 2015
Transaction ID : SA11.973846

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. DOROTHY B. ROBERTS

Mailing Address 1970 LEMON RANCH ROAD

City State Zip Code
SANTA BARBARA CA 93108-2257

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 ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 30 / 2015
Transaction ID : SA11.974118

Amount of Each Receipt this Period
300.00

CONTRIBUTION

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

Mailing Address 1820 NE 104TH AVE APT 66
APARTMENT 66

City State Zip Code
PORTLAND OR 97220-3819

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
 04 / 30 / 2015
Transaction ID : SA11.974259

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00

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

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

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FOR LINE NUMBER: PAGE 22 OF 115
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 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. JACK D. SMITH

Mailing Address 177 BOUNDARY LAN

City State Zip Code
OTTERVILLE MO 65348-2420

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
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2015
Transaction ID : SA11.974049

Amount of Each Receipt this Period
150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. GURDON B WATTLES

Mailing Address 45 ROCKEFELLER PLZ STE 630

City State Zip Code
NEW YORK NY 10111-0100

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 ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2015
Transaction ID : SA11.974257

Amount of Each Receipt this Period
300.00

CONTRIBUTION

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	14045.75

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

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

FOR LINE NUMBER: PAGE 23 OF 115
(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. REPUBLICAN NATIONAL COMMITTEE

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 ▼
 24400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 01 / 2015

Transaction ID : SA11.975306

Amount of Each Receipt this Period
 6100.00

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

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	6100.00
TOTAL This Period (last page this line number only).....▶	6100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 115
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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. ALTRIA GROUP INC.

Mailing Address 101 CONSITUTION AVENUE NW

City WASHINGTON State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2015
Transaction ID : SA11.975312

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. ASSOCIATED BUILDERS AND CONTRACTORS POLI

Mailing Address 4250 N. FAIRFAX DRIVE, 9TH FLOOR

City ARLINGTON State VA Zip Code 22203-1665

FEC ID number of contributing federal political committee. **C** C00010421

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2015
Transaction ID : SA11.975308

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. ELI LILLY AND COMPANY POLITICAL ACTION C

Mailing Address LILLY CORPORATE CENTER

City INDIANAPOLIS State IN Zip Code 46285-1

FEC ID number of contributing federal political committee. **C** C00082792

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2015
Transaction ID : SA11.975307

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8500.00
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 25 OF 115
(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. NORTHWESTERN MUTUAL LIFE FEDERAL PAC

Mailing Address **777 E WISCONSIN AVE.**

City State Zip Code
MILWAUKEE WI 53202-5302

FEC ID number of contributing federal political committee. **C C00197095**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
04 / 13 / 2015

Transaction ID : SA11.975311

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. SUNOVION PHARMACEUTICALS INC. GOOD GOVERNANCE FUND

Mailing Address **84 WATERFORD DR**

City State Zip Code
MARLBOROUGH MA 01752-7010

FEC ID number of contributing federal political committee. **C C00423236**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
04 / 13 / 2015

Transaction ID : SA11.975313

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. THRIVENT FINANCIAL FOR LUTHERANS EMPLOYEE PAC

Mailing Address **POST OFFICE BOX 1892**

City State Zip Code
APPLETON WI 54912-1892

FEC ID number of contributing federal political committee. **C C00121319**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
04 / 13 / 2015

Transaction ID : SA11.975310

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **6500.00**

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 26 OF 115
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

Full Name (Last, First, Middle Initial)
A. UNION PACIFIC CORP FUND FOR EFFECTIVE GOV. FED

Mailing Address 600 THIRTEENTH ST NW
STE 340

City WASHINGTON State DC Zip Code 20005-3012

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 04 / 13 / 2015
Transaction ID : SA11.975309

Amount of Each Receipt this Period: 2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. LIBERTY MUTUAL INSURANCE COMPANY-PAC

Mailing Address 175 BERKELEY STEET

City BOSTON State MA Zip Code 02116-5066

FEC ID number of contributing federal political committee. **C** C00171843

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 04 / 30 / 2015
Transaction ID : SA11.975314

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. LKQ CORP GOOD GOVERNMENT FUND

Mailing Address 5975 N FEDERAL HIGHWAY
STE 130

City FORT LAUDERDALE State FL Zip Code 33308

FEC ID number of contributing federal political committee. **C** C00458158

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt: 04 / 30 / 2015
Transaction ID : MCW052015

Amount of Each Receipt this Period: 2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5500.00

TOTAL This Period (last page this line number only)..... ▶ 20500.00

**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. MAJORITY STRATEGIES

Mailing Address 135 PROFESSIONAL DRIVE

City State Zip Code
PONTE VEDRA BEACH FL 32082

Purpose of Disbursement
PRINTING - 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
04 / 01 / 2015

Transaction ID : **SB21B.I21721**

Amount of Each Disbursement this Period

5939.09

Full Name (Last, First, Middle Initial)

B. 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
04 / 01 / 2015

Transaction ID : **SB21B.I21686**

Amount of Each Disbursement this Period

192.80

Full Name (Last, First, Middle Initial)

C. PUSH DIGITAL

Mailing Address P.O. BOX 7431

City State Zip Code
COLUMBIA SC 29202

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

MM / DD / YYYY
04 / 01 / 2015

Transaction ID : **SB21B.I21710**

Amount of Each Disbursement this Period

3000.00

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

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

9131.89

**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. 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

M M M	/	D D D	/	Y Y Y Y Y
04		01		2015

Transaction ID : SB21B.I21708

Amount of Each Disbursement this Period

8767.40

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

M M M	/	D D D	/	Y Y Y Y Y
04		02		2015

Transaction ID : SB21B.I21671

Amount of Each Disbursement this Period

373.86

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

M M M	/	D D D	/	Y Y Y Y Y
04		02		2015

Transaction ID : SB21B.I21690

Amount of Each Disbursement this Period

61.80

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

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

9203.06

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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. AMERICAN LIBERTY GROUP

Mailing Address 611 PENNSYLVANIA AVENUE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FUNDRAISING - NOT FEA

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	1	5

Transaction ID : SB21B.I21712

Amount of Each Disbursement this Period

1	1	4	7	9	.	6	0
---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. CONNECTIVIST MEDIA LLC

Mailing Address 544 E. OGDEN AVENUE #700-161

City MILWAUKEE State WI Zip Code 53202

Purpose of Disbursement
DIGITAL CONSULTANT

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	1	5

Transaction ID : SB21B.I21718

Amount of Each Disbursement this Period

2	6	0	.	0	0
---	---	---	---	---	---

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	1	5

Transaction ID : SB21B.I21688

Amount of Each Disbursement this Period

1	0	0	.	6	0
---	---	---	---	---	---

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

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

1	1	8	4	0	.	2	0
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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. 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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		06		2015

Transaction ID : SB21B.I21705

Amount of Each Disbursement this Period

7.20

Full Name (Last, First, Middle Initial)

B. BMO HARRIS BANK NA 8787

Mailing Address P.O. BOX 3052

City State Zip Code
MILWAUKEE WI 53201

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		07		2015

Transaction ID : SB21B.I21678

Amount of Each Disbursement this Period

148.24

Full Name (Last, First, Middle Initial)

C. 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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		10		2015

Transaction ID : SB21B.I21760

Amount of Each Disbursement this Period

148.24

[MEMO ITEM]

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

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

155.44

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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. 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

M M / D D / Y Y Y Y
04 / 07 / 2015

Transaction ID : SB21B.I21697

Amount of Each Disbursement this Period

15.80

Full Name (Last, First, Middle Initial)

B. PUSH DIGITAL

Mailing Address P.O. BOX 7431

City COLUMBIA State SC Zip Code 29202

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 / D D / Y Y Y Y
04 / 07 / 2015

Transaction ID : SB21B.I21711

Amount of Each Disbursement this Period

2128.60

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

M M / D D / Y Y Y Y
04 / 08 / 2015

Transaction ID : SB21B.I21706

Amount of Each Disbursement this Period

5.00

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

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

2149.40

**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. WISC DEPT OF REVENUE - SLS TX

Mailing Address P.O. BOX 930208

City MILWAUKEE State WI Zip Code 53293

Purpose of Disbursement
SALES/USE TAX

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2015

Transaction ID : **SB21B.I21725**

Amount of Each Disbursement this Period

715.20

B. 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) ▼

Date of Disbursement

MM / DD / YYYY
04 / 10 / 2015

Transaction ID : **SB21B.I21684**

Amount of Each Disbursement this Period

550.49

C. 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) ▼

Date of Disbursement

MM / DD / YYYY
04 / 10 / 2015

Transaction ID : **SB21B.I21672**

Amount of Each Disbursement this Period

145.92

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

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

1411.61

**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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	10	/	2015

Transaction ID : SB21B.I21673

Amount of Each Disbursement this Period

12.00

B. PIRYX

Full Name (Last, First, Middle Initial)

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

M M M	/	D D D	/	Y Y Y Y Y
04	/	13	/	2015

Transaction ID : SB21B.I21693

Amount of Each Disbursement this Period

29.00

C. JOURNAL BROADCAST GROUP

Full Name (Last, First, Middle Initial)

Mailing Address 720 E CAPITOL DRIVE

City MILWAUKEE State WI Zip Code 53212

Purpose of Disbursement
SUBSCRIPTION

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
04	/	14	/	2015

Transaction ID : SB21B.I21726

Amount of Each Disbursement this Period

900.00

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

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

941.00

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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. MAJORITY STRATEGIES

Mailing Address 135 PROFESSIONAL DRIVE

City State Zip Code
PONTE VEDRA BEACH FL 32082

Purpose of Disbursement
PRINTING - NOT FEA

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
04 / 14 / 2015

Transaction ID : SB21B.I21722

Amount of Each Disbursement this Period

2450.00

Full Name (Last, First, Middle Initial)

B. 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

M M M / D D D / Y Y Y Y Y Y
04 / 14 / 2015

Transaction ID : SB21B.I21703

Amount of Each Disbursement this Period

8.00

Full Name (Last, First, Middle Initial)

C. VILLAGE GRAPHICS PRINTING, LLC

Mailing Address 108 W CAPITOL DRIVE

City State Zip Code
HARTLAND WI 53029

Purpose of Disbursement
PRINTING - NOT FEA

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
04 / 14 / 2015

Transaction ID : SB21B.I21723

Amount of Each Disbursement this Period

263.07

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

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

2721.07

**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. AMERICAN LIBERTY GROUP

Mailing Address 611 PENNSYLVANIA AVENUE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FUNDRAISING - NOT FEA

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
04 / 15 / 2015

Transaction ID : SB21B.I21714

Amount of Each Disbursement this Period

1700.00

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

M M M / D D D / Y Y Y Y Y Y
04 / 15 / 2015

Transaction ID : SB21B.I21704

Amount of Each Disbursement this Period

8.00

Full Name (Last, First, Middle Initial)

C. BMO HARRIS BANK NA 8787

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) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 16 / 2015

Transaction ID : SB21B.I21679

Amount of Each Disbursement this Period

39.41

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

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

1747.41

**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

M M M / D D D / Y Y Y Y Y Y
04 / 16 / 2015

Transaction ID : SB21B.I21852

Amount of Each Disbursement this Period

39.41

[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

M M M / D D D / Y Y Y Y Y Y
04 / 16 / 2015

Transaction ID : SB21B.I21694

Amount of Each Disbursement this Period

29.00

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

M M M / D D D / Y Y Y Y Y Y
04 / 16 / 2015

Transaction ID : SB21B.I21700

Amount of Each Disbursement this Period

11.56

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

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

40.56

**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 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. AMERICAN LIBERTY GROUP

Mailing Address 611 PENNSYLVANIA AVENUE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FUNDRAISING - 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
04 / 17 / 2015

Transaction ID : SB21B.I21715

Amount of Each Disbursement this Period

750.00

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
04 / 17 / 2015

Transaction ID : SB21B.I21699

Amount of Each Disbursement this Period

12.80

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
04 / 17 / 2015

Transaction ID : SB21B.I21709

Amount of Each Disbursement this Period

2001.34

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

2764.14

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. ASPECT CONSULTING, LLC

Mailing Address 8401 EXCELSIOR DRIVE

City MADISON State WI Zip Code 53717

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 20 / 2015

Transaction ID : SB21B.I21675

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

B. LEXISNEXIS

Mailing Address P.O. BOX 2314

City CAROL STREAM State IL Zip Code 60132

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 20 / 2015

Transaction ID : SB21B.I21727

Amount of Each Disbursement this Period

379.00

Full Name (Last, First, Middle Initial)

C. LIND WEININGER LLC

Mailing Address 8020 EXCELSIOR DRIVE #402

City MADISON State WI Zip Code 53717

Purpose of Disbursement
LEGAL SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 20 / 2015

Transaction ID : SB21B.I21719

Amount of Each Disbursement this Period

1000.00

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

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

7379.00

**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

MM / DD / YYYY
04 / 20 / 2015

Transaction ID : SB21B.I21701

Amount of Each Disbursement this Period

11.20

Full Name (Last, First, Middle Initial)

B. WEST BEND MUTUAL

Mailing Address 1900 S 18TH AVENUE

City State Zip Code
WEST BEND WI 53095

Purpose of Disbursement
INSURANCE EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 20 / 2015

Transaction ID : SB21B.I21732

Amount of Each Disbursement this Period

141.00

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
04 / 21 / 2015

Transaction ID : SB21B.I21702

Amount of Each Disbursement this Period

8.20

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

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

160.40

**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

M M M / D D D / Y Y Y Y Y Y
04 / 22 / 2015

Transaction ID : SB21B.I21696

Amount of Each Disbursement this Period

16.48

Full Name (Last, First, Middle Initial)

B. DAN MORSE CONSULTING LLC

Mailing Address 5205 BARTON ROAD

City State Zip Code
MADISON WI 53711

Purpose of Disbursement
FUNDRAISING CONSULTANT

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
04 / 23 / 2015

Transaction ID : SB21B.I21717

Amount of Each Disbursement this Period

7000.00

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

M M M / D D D / Y Y Y Y Y Y
04 / 23 / 2015

Transaction ID : SB21B.I21691

Amount of Each Disbursement this Period

52.40

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

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

7068.88

**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

M M M / D D D / Y Y Y Y Y Y
04 / 24 / 2015

Transaction ID : SB21B.I21698

Amount of Each Disbursement this Period

15.20

Full Name (Last, First, Middle Initial)

B. CITY TREASURER - WATER/SEWER

Mailing Address P.O. BOX 2997

City State Zip Code
MADISON WI 53701

Purpose of Disbursement
UTILITIES

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
04 / 27 / 2015

Transaction ID : SB21B.I21729

Amount of Each Disbursement this Period

87.52

Full Name (Last, First, Middle Initial)

C. FLS CONNECT

Mailing Address 7300 HUDSON BLVD, SUITE 270

City State Zip Code
ST. PAUL MN 55128-7143

Purpose of Disbursement
CONFERENCE CALLS

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
04 / 27 / 2015

Transaction ID : SB21B.I21676

Amount of Each Disbursement this Period

165.75

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

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

268.47

**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 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. LEXISNEXIS

Mailing Address P.O. BOX 2314

City State Zip Code
CAROL STREAM IL 60132

Purpose of Disbursement
SUBSCRIPTION

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
04	/	27	/	2015

Transaction ID : SB21B.I21728

Amount of Each Disbursement this Period

379.00

Full Name (Last, First, Middle Initial)

B. 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

M M M	/	D D D	/	Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SB21B.I21692

Amount of Each Disbursement this Period

38.20

Full Name (Last, First, Middle Initial)

C. BMO HARRIS BANK NA 8787

Mailing Address P.O. BOX 3052

City State Zip Code
MILWAUKEE WI 53201

Purpose of Disbursement
CREDIT CARD PAYMENT

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
04	/	28	/	2015

Transaction ID : SB21B.I21677

Amount of Each Disbursement this Period

217.76

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

634.96

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. 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
02 / 25 / 2015

Transaction ID : SB21B.I21846

Amount of Each Disbursement this Period

19.00

[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
04 / 10 / 2015

Transaction ID : SB21B.I21849

Amount of Each Disbursement this Period

2.69

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. 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
04 / 10 / 2015

Transaction ID : SB21B.I21850

Amount of Each Disbursement this Period

39.00

[MEMO ITEM]

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

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

0.00

**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. WALGREEN'S

Mailing Address 606 S WHITNEY WAY

City MADISON State WI Zip Code 53711

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	9			2	0	1	5		

Transaction ID : SB21B.I21851

Amount of Each Disbursement this Period

2	0	9	7
---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. BMO HARRIS BANK NA 8787

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	8			2	0	1	5		

Transaction ID : SB21B.I21680

Amount of Each Disbursement this Period

1	4	5	1	9	1
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. 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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB21B.I21780

Amount of Each Disbursement this Period

9	6	9
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[MEMO ITEM]

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

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

1	4	5	1	9	1
---	---	---	---	---	---

9	6	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 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
04 / 10 / 2015

Transaction ID : SB21B.I21781

Amount of Each Disbursement this Period

39.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. GRANDSTAY OF MADISON

Mailing Address 5317 HIGH CROSSING BOULEVARD

City MADISON State WI Zip Code 53718

Purpose of Disbursement
STAFF LODGING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2015

Transaction ID : SB21B.I21762

Amount of Each Disbursement this Period

80.15

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. GRANDSTAY OF MADISON

Mailing Address 5317 HIGH CROSSING BOULEVARD

City MADISON State WI Zip Code 53718

Purpose of Disbursement
STAFF LODGING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 13 / 2015

Transaction ID : SB21B.I21764

Amount of Each Disbursement this Period

80.15

[MEMO ITEM]

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

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

0.00

**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. GRANDSTAY OF MADISON

Mailing Address 5317 HIGH CROSSING BOULEVARD

City MADISON State WI Zip Code 53718

Purpose of Disbursement
STAFF LODGING

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
02 / 17 / 2015

Transaction ID : SB21B.I21767

Amount of Each Disbursement this Period

80.15

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. GRANDSTAY OF MADISON

Mailing Address 5317 HIGH CROSSING BOULEVARD

City MADISON State WI Zip Code 53718

Purpose of Disbursement
STAFF LODGING

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
02 / 25 / 2015

Transaction ID : SB21B.I21771

Amount of Each Disbursement this Period

232.44

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. GRANDSTAY OF MADISON

Mailing Address 5317 HIGH CROSSING BOULEVARD

City MADISON State WI Zip Code 53718

Purpose of Disbursement
STAFF LODGING

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
03 / 03 / 2015

Transaction ID : SB21B.I21772

Amount of Each Disbursement this Period

80.15

[MEMO ITEM]

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

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

0.00

**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. GRANDSTAY OF MADISON

Mailing Address 5317 HIGH CROSSING BOULEVARD

City MADISON State WI Zip Code 53718

Purpose of Disbursement
STAFF LODGING

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
03	/	04	/	2015

Transaction ID : SB21B.I21773

Amount of Each Disbursement this Period

80.15

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. GRANDSTAY OF MADISON

Mailing Address 5317 HIGH CROSSING BOULEVARD

City MADISON State WI Zip Code 53718

Purpose of Disbursement
STAFF LODGING

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
03	/	17	/	2015

Transaction ID : SB21B.I21774

Amount of Each Disbursement this Period

80.15

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. GRANDSTAY OF MADISON

Mailing Address 5317 HIGH CROSSING BOULEVARD

City MADISON State WI Zip Code 53718

Purpose of Disbursement
STAFF LODGING

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
03	/	19	/	2015

Transaction ID : SB21B.I21775

Amount of Each Disbursement this Period

80.15

[MEMO ITEM]

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

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

0.00

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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. GRANDSTAY OF MADISON

Mailing Address 5317 HIGH CROSSING BOULEVARD

City MADISON State WI Zip Code 53718

Purpose of Disbursement
STAFF LODGING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2015

Transaction ID : SB21B.I21776

Amount of Each Disbursement this Period

80.15

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. GRANDSTAY OF MADISON

Mailing Address 5317 HIGH CROSSING BOULEVARD

City MADISON State WI Zip Code 53718

Purpose of Disbursement
STAFF LODGING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 27 / 2015

Transaction ID : SB21B.I21777

Amount of Each Disbursement this Period

80.15

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. GRANDSTAY OF MADISON

Mailing Address 5317 HIGH CROSSING BOULEVARD

City MADISON State WI Zip Code 53718

Purpose of Disbursement
STAFF LODGING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2015

Transaction ID : SB21B.I21778

Amount of Each Disbursement this Period

80.15

[MEMO ITEM]

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

0.00

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. BMO HARRIS BANK NA 8787

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	8			2	0	1	5		

Transaction ID : SB21B.I21681

Amount of Each Disbursement this Period

1	1	0	2	1	.	2	0
---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. AMAZON.COM

Mailing Address 1516 2ND AVENUE

City SEATTLE State WA Zip Code 98101

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB21B.I21794

Amount of Each Disbursement this Period

8	3	1	.	8	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AMAZON.COM

Mailing Address 1516 2ND AVENUE

City SEATTLE State WA Zip Code 98101

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	1	5		

Transaction ID : SB21B.I21800

Amount of Each Disbursement this Period

2	1	.	0	8
---	---	---	---	---

[MEMO ITEM]

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

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

1	1	0	2	1	.	2	0
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1	1	0	2	1	.	2	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 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. AMAZON.COM

Mailing Address 1516 2ND AVENUE

City SEATTLE State WA Zip Code 98101

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 11 / 2015

Transaction ID : SB21B.I21816

Amount of Each Disbursement this Period

17.26

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. AMAZON.COM

Mailing Address 1516 2ND AVENUE

City SEATTLE State WA Zip Code 98101

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2015

Transaction ID : SB21B.I21818

Amount of Each Disbursement this Period

257.47

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AMAZON.COM

Mailing Address 1516 2ND AVENUE

City SEATTLE State WA Zip Code 98101

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 18 / 2015

Transaction ID : SB21B.I21825

Amount of Each Disbursement this Period

307.99

[MEMO ITEM]

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

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

0.00

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. AMAZON.COM

Mailing Address 1516 2ND AVENUE

City SEATTLE State WA Zip Code 98101

Purpose of Disbursement
OFFICE SUPPLIES

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	3		1	8		2	0	1	5

Transaction ID : SB21B.I21827

Amount of Each Disbursement this Period

5	2	.	6	5
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. AMAZON.COM

Mailing Address 1516 2ND AVENUE

City SEATTLE State WA Zip Code 98101

Purpose of Disbursement
OFFICE SUPPLIES

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	3		2	3		2	0	1	5

Transaction ID : SB21B.I21831

Amount of Each Disbursement this Period

5	0	.	0	9
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AMAZON.COM

Mailing Address 1516 2ND AVENUE

City SEATTLE State WA Zip Code 98101

Purpose of Disbursement
OFFICE SUPPLIES

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	3		2	5		2	0	1	5

Transaction ID : SB21B.I21833

Amount of Each Disbursement this Period

1	2	.	6	4
---	---	---	---	---

[MEMO ITEM]

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

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

0	0	0
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0	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 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. BEST BUY

Mailing Address 7357 WEST TOWNE WAY

City MADISON State WI Zip Code 53719

Purpose of Disbursement
OFFICE SUPPLIES

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
03 / 03 / 2015

Transaction ID : SB21B.I21808

Amount of Each Disbursement this Period

421.99

[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

M M M / D D D / Y Y Y Y Y Y
03 / 10 / 2015

Transaction ID : SB21B.I21815

Amount of Each Disbursement this Period

149.08

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. 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

M M M / D D D / Y Y Y Y Y Y
04 / 10 / 2015

Transaction ID : SB21B.I21844

Amount of Each Disbursement this Period

199.49

[MEMO ITEM]

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

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

0.00

**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. 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

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

Transaction ID : SB21B.I21845

Amount of Each Disbursement this Period

3	9	.	0	0
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. GETTY IMAGES

Mailing Address 744 WILLIAMSON ST

City MADISON State WI Zip Code 53703

Purpose of Disbursement
DIGITAL

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
0	3			1	7			2	0	1	5		

Transaction ID : SB21B.I21824

Amount of Each Disbursement this Period

3	0	2	.	7	9
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. GETTY IMAGES

Mailing Address 744 WILLIAMSON ST

City MADISON State WI Zip Code 53703

Purpose of Disbursement
DIGITAL

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
0	3			1	9			2	0	1	5		

Transaction ID : SB21B.I21829

Amount of Each Disbursement this Period

1	5	8	.	2	5
---	---	---	---	---	---

[MEMO ITEM]

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

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

0	0	0
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0	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 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. GLASS NICKEL PIZZA

Mailing Address 2916 ATWOOD AVENUE

City MADISON State WI Zip Code 53704

Purpose of Disbursement
MEETING 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
02 / 24 / 2015

Transaction ID : SB21B.I21795

Amount of Each Disbursement this Period

60.65

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. GLASS NICKEL PIZZA

Mailing Address 2916 ATWOOD AVENUE

City MADISON State WI Zip Code 53704

Purpose of Disbursement
MEETING 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
02 / 27 / 2015

Transaction ID : SB21B.I21804

Amount of Each Disbursement this Period

104.90

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. GODADDY.COM

Mailing Address 14455 N HAYDEN ROAD

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement
WEBSITE SERVICE

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
02 / 19 / 2015

Transaction ID : SB21B.I21786

Amount of Each Disbursement this Period

60.48

[MEMO ITEM]

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

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

0.00

**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. GODADDY.COM

Mailing Address 14455 N HAYDEN ROAD

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement
WEBSITE SERVICE

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
02		19		2015

Transaction ID : SB21B.I21787

Amount of Each Disbursement this Period

80.64

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. GODADDY.COM

Mailing Address 14455 N HAYDEN ROAD

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement
WEBSITE MAINTENANCE

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
02		23		2015

Transaction ID : SB21B.I21789

Amount of Each Disbursement this Period

20.16

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. GODADDY.COM

Mailing Address 14455 N HAYDEN ROAD

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement
WEBSITE MAINTENANCE

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
02		23		2015

Transaction ID : SB21B.I21790

Amount of Each Disbursement this Period

20.16

[MEMO ITEM]

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

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

0.00

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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. GODADDY.COM

Mailing Address 14455 N HAYDEN ROAD

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement
WEBSITE MAINTENANCE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 23 / 2015

Transaction ID : SB21B.I21791

Amount of Each Disbursement this Period

20.16

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. GODADDY.COM

Mailing Address 14455 N HAYDEN ROAD

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement
WEBSITE HOSTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 01 / 2015

Transaction ID : SB21B.I21799

Amount of Each Disbursement this Period

8.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. GODADDY.COM

Mailing Address 14455 N HAYDEN ROAD

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement
WEBSITE REGISTRATION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 09 / 2015

Transaction ID : SB21B.I21814

Amount of Each Disbursement this Period

25.16

[MEMO ITEM]

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

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

0.00

**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. GODADDY.COM

Mailing Address 14455 N HAYDEN ROAD

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement
WEBSITE MAINTENANCE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2015

Transaction ID : SB21B.I21820

Amount of Each Disbursement this Period

25.16

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. GODADDY.COM

Mailing Address 14455 N HAYDEN ROAD

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement
WEBSITE MAINTENANCE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 17 / 2015

Transaction ID : SB21B.I21822

Amount of Each Disbursement this Period

4.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. GODADDY.COM

Mailing Address 14455 N HAYDEN ROAD

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement
WEBSITE SUBSCRIPTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 18 / 2015

Transaction ID : SB21B.I21826

Amount of Each Disbursement this Period

27.99

[MEMO ITEM]

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

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

0.00

**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. GODADDY.COM

Mailing Address 14455 N HAYDEN ROAD

City State Zip Code
SCOTTSDALE AZ 85260

Purpose of Disbursement
WEBSITE MAINTENANCE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2015

Transaction ID : SB21B.I21828

Amount of Each Disbursement this Period

23.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. GODADDY.COM

Mailing Address 14455 N HAYDEN ROAD

City State Zip Code
SCOTTSDALE AZ 85260

Purpose of Disbursement
WEBSITE REGISTRATION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		01		2015

Transaction ID : SB21B.I21837

Amount of Each Disbursement this Period

8.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. GODADDY.COM

Mailing Address 14455 N HAYDEN ROAD

City State Zip Code
SCOTTSDALE AZ 85260

Purpose of Disbursement
WEBSITE MAINTENANCE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		07		2015

Transaction ID : SB21B.I21842

Amount of Each Disbursement this Period

4.99

[MEMO ITEM]

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

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

0.00

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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. GODADDY.COM

Mailing Address 14455 N HAYDEN ROAD

City State Zip Code
SCOTTSDALE AZ 85260

Purpose of Disbursement
WEBSITE MAINTENANCE

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
04 / 08 / 2015

Transaction ID : SB21B.I21843

Amount of Each Disbursement this Period

28.16

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MICROSOFT

Mailing Address 1 MICROSOFT WAY

City State Zip Code
REDMOND WA 98052

Purpose of Disbursement
SOFTWARE SUBSCRIPTION

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
02 / 28 / 2015

Transaction ID : SB21B.I21805

Amount of Each Disbursement this Period

143.61

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MICROSOFT

Mailing Address 1 MICROSOFT WAY

City State Zip Code
REDMOND WA 98052

Purpose of Disbursement
SOFTWARE SUBSCRIPTION

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
03 / 31 / 2015

Transaction ID : SB21B.I21836

Amount of Each Disbursement this Period

140.00

[MEMO ITEM]

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

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

0.00

**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. PELLITTERI WASTE SYSTEMS

Mailing Address 7035 RAYWOOD RD

City MADISON State WI Zip Code 53713

Purpose of Disbursement
WASTE REMOVAL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB21B.I21817

Amount of Each Disbursement this Period

2	3	5	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. RALLYCONGRESS.COM

Mailing Address 2200 WILSON BLVD. #102-299

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
DOMAIN HOSTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB21B.I21782

Amount of Each Disbursement this Period

2	4	9	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. RALLYCONGRESS.COM

Mailing Address 2200 WILSON BLVD. #102-299

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
DOMAIN HOSTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB21B.I21806

Amount of Each Disbursement this Period

2	4	9	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

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

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

0	0	0	.	0	0
---	---	---	---	---	---

0	0	0	.	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 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. RALLYCONGRESS.COM

Mailing Address 2200 WILSON BLVD. #102-299

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
DOMAIN HOSTING

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
04 / 01 / 2015

Transaction ID : SB21B.I21839

Amount of Each Disbursement this Period

249.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. SAFESOFT 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) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 03 / 2015

Transaction ID : SB21B.I21809

Amount of Each Disbursement this Period

2030.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. SAFESOFT 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) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 03 / 2015

Transaction ID : SB21B.I21841

Amount of Each Disbursement this Period

2030.00

[MEMO ITEM]

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

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

0.00

**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. THE GREAT DANE PUB

Mailing Address 2980 CAHILL MAIN

City FITCHBURG State WI Zip Code 53711

Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 23 / 2015

Transaction ID : SB21B.I21793

Amount of Each Disbursement this Period

112.62

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. THE GREAT DANE PUB

Mailing Address 2980 CAHILL MAIN

City FITCHBURG State WI Zip Code 53711

Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2015

Transaction ID : SB21B.I21812

Amount of Each Disbursement this Period

111.81

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. TWITTER ADVERTISING

Mailing Address 1355 MARKET STREET

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
ADVERTISING EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2015

Transaction ID : SB21B.I21784

Amount of Each Disbursement this Period

42.80

[MEMO ITEM]

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

0.00

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. TWITTER ADVERTISING

Mailing Address 1355 MARKET STREET

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
ADVERTISING EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 19 / 2015

Transaction ID : SB21B.I21788

Amount of Each Disbursement this Period

257.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. VERTICAL RESPONSE

Mailing Address 50 BEALE STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
WEBSITE MAINTENANCE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2015

Transaction ID : SB21B.I21783

Amount of Each Disbursement this Period

499.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. VERTICAL RESPONSE

Mailing Address 50 BEALE STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
WEBSITE MAINTENANCE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2015

Transaction ID : SB21B.I21821

Amount of Each Disbursement this Period

499.00

[MEMO ITEM]

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

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

0.00

**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. WALGREEN'S

Mailing Address 606 S WHITNEY WAY

City MADISON State WI Zip Code 53711

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2015

Transaction ID : SB21B.I21792

Amount of Each Disbursement this Period

12.24

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. WALGREEN'S

Mailing Address 606 S WHITNEY WAY

City MADISON State WI Zip Code 53711

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 25 / 2015

Transaction ID : SB21B.I21796

Amount of Each Disbursement this Period

211.14

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. WALGREEN'S

Mailing Address 606 S WHITNEY WAY

City MADISON State WI Zip Code 53711

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2015

Transaction ID : SB21B.I21811

Amount of Each Disbursement this Period

5.00

[MEMO ITEM]

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

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

0.00

**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

M M M / D D D / Y Y Y Y Y Y
04 / 28 / 2015

Transaction ID : SB21B.I21689

Amount of Each Disbursement this Period

65.00

Full Name (Last, First, Middle Initial)

B. 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

M M M / D D D / Y Y Y Y Y Y
04 / 28 / 2015

Transaction ID : SB21B.I21695

Amount of Each Disbursement this Period

29.00

Full Name (Last, First, Middle Initial)

C. AMERICAN LIBERTY GROUP

Mailing Address 611 PENNSYLVANIA AVENUE SE

City State Zip Code
WASHINGTON DC 20003

Purpose of Disbursement
FUNDRAISING - NOT FEA

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
04 / 29 / 2015

Transaction ID : SB21B.I21713

Amount of Each Disbursement this Period

2006.40

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

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

2100.40

**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. GREENSCAPES

Mailing Address 2960 TRIVERTON PIKE DRIVE

City MADISON State WI Zip Code 53711

Purpose of Disbursement
BUILDING MAINTENANCE

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
04	/	29	/	2015

Transaction ID : SB21B.I21674

Amount of Each Disbursement this Period

655.06

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

M M M	/	D D D	/	Y Y Y Y Y
04	/	29	/	2015

Transaction ID : SB21B.I21685

Amount of Each Disbursement this Period

204.40

Full Name (Last, First, Middle Initial)

C. STRATEGIC FUNDRAISING

Mailing Address 2625 MOMENTUM PLACE

City CHICAGO State IL Zip Code 60689

Purpose of Disbursement
FUNDRAISING - NOT FEA

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
04	/	29	/	2015

Transaction ID : SB21B.I21716

Amount of Each Disbursement this Period

7807.78

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

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

8667.24

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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. 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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2015

Transaction ID : SB21B.I21687

Amount of Each Disbursement this Period

190.60

Full Name (Last, First, Middle Initial)

B. WISC DEPT OF REVENUE - SLS TX

Mailing Address P.O. BOX 930208

City State Zip Code
MILWAUKEE WI 53293

Purpose of Disbursement
SALES/USE TAX

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2015

Transaction ID : SB21B.I21724

Amount of Each Disbursement this Period

869.09

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

1059.69

81917.93

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)			PAGE 68 OF 115		
<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"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" 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. LKQ CORP GOOD GOVERNMENT FUND		Date of Disbursement <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 5975 N FEDERAL HIGHWAY STE 130		<input type="text"/> / <input type="text"/> / <input type="text"/>	
City FORT LAUDERDALE	State FL	Zip Code 33308	Transaction ID : MCW052015MD Amount of Each Disbursement this Period <input type="text"/> 2000.00
Purpose of Disbursement RETURNED CONTRIBUTION		Category/ Type <input type="text"/>	
Candidate Name LKQ CORP GOOD GOVERNMENT FUND			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

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

SUBTOTAL of Disbursements This Page (optional)..... ▶	<input type="text"/> 2000.00
TOTAL This Period (last page this line number only)..... ▶	<input type="text"/> 2000.00

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

Use separate schedule(s)
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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. ZACHARY BROWN

Mailing Address 10 TURNWOOD CIRCLE

City VERONA State WI Zip Code 53593

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.I21652

Amount of Each Disbursement this Period

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.I21649

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. CATHERINE DILLON

Mailing Address 3612 CALVEND LANE

City KENSINGTON State MD Zip Code 20895

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.I21621

Amount of Each Disbursement this Period

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. JOSEPH FADNESS

Mailing Address 9506 S RYAN GREEN CT

City FRANKLIN State WI Zip Code 53132-2237

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
04 / 15 / 2015

Transaction ID : SB30B.I21636

Amount of Each Disbursement this Period

2941.95

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address PO BOX 9100

City AURORA State IL Zip Code 60598-9100

Purpose of Disbursement
PHONE 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
12 / 19 / 2013

Transaction ID : SB30B.I21734

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address PO BOX 9100

City AURORA State IL Zip Code 60598-9100

Purpose of Disbursement
PHONE 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 / 19 / 2014

Transaction ID : SB30B.I21735

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

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

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

2941.95

**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. AT&T

Mailing Address PO BOX 9100

City State Zip Code
AURORA IL 60598-9100

Purpose of Disbursement
PHONE 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
02 / 19 / 2014

Transaction ID : SB30B.I21736

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address PO BOX 9100

City State Zip Code
AURORA IL 60598-9100

Purpose of Disbursement
PHONE 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
03 / 19 / 2014

Transaction ID : SB30B.I21737

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address PO BOX 9100

City State Zip Code
AURORA IL 60598-9100

Purpose of Disbursement
PHONE 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
04 / 19 / 2014

Transaction ID : SB30B.I21738

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

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

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

0.00

**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 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. AT&T

Mailing Address PO BOX 9100

City State Zip Code
AURORA IL 60598-9100

Purpose of Disbursement
PHONE 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
05 / 19 / 2014

Transaction ID : SB30B.I21739

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address PO BOX 9100

City State Zip Code
AURORA IL 60598-9100

Purpose of Disbursement
PHONE 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
06 / 19 / 2014

Transaction ID : SB30B.I21740

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address PO BOX 9100

City State Zip Code
AURORA IL 60598-9100

Purpose of Disbursement
PHONE 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
07 / 19 / 2014

Transaction ID : SB30B.I21741

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

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

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

0.00

**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 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. AT&T

Mailing Address PO BOX 9100

City State Zip Code
AURORA IL 60598-9100

Purpose of Disbursement
PHONE 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
08 / 19 / 2014

Transaction ID : SB30B.I21742

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address PO BOX 9100

City State Zip Code
AURORA IL 60598-9100

Purpose of Disbursement
PHONE 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
09 / 19 / 2014

Transaction ID : SB30B.I21743

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address PO BOX 9100

City State Zip Code
AURORA IL 60598-9100

Purpose of Disbursement
PHONE 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
10 / 19 / 2014

Transaction ID : SB30B.I21744

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

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

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

0.00

**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 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. AT&T

Mailing Address PO BOX 9100

City State Zip Code
AURORA IL 60598-9100

Purpose of Disbursement
PHONE EXPENSE

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
11			19			2014			

Transaction ID : SB30B.I21745

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address PO BOX 9100

City State Zip Code
AURORA IL 60598-9100

Purpose of Disbursement
PHONE EXPENSE

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
12			19			2014			

Transaction ID : SB30B.I21746

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address PO BOX 9100

City State Zip Code
AURORA IL 60598-9100

Purpose of Disbursement
PHONE EXPENSE

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
01			19			2015			

Transaction ID : SB30B.I21747

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

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

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

0.00

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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 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. AT&T

Mailing Address PO BOX 9100

City State Zip Code
AURORA IL 60598-9100

Purpose of Disbursement
PHONE 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
02 / 19 / 2015

Transaction ID : SB30B.I21748

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. GRANDSTAY RESIDENTIAL SUITES

Mailing Address 5317 HIGH CROSSING BLVD

City State Zip Code
MADISON WI 53718

Purpose of Disbursement
STAFF LODGING

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 / 17 / 2014

Transaction ID : SB30B.I21753

Amount of Each Disbursement this Period

160.30

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. GRANDSTAY RESIDENTIAL SUITES

Mailing Address 5317 HIGH CROSSING BLVD

City State Zip Code
MADISON WI 53718

Purpose of Disbursement
STAFF LODGING

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 / 2015

Transaction ID : SB30B.I21754

Amount of Each Disbursement this Period

160.30

[MEMO ITEM]

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

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

0.00

**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 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. GRANDSTAY RESIDENTIAL SUITES

Mailing Address 5317 HIGH CROSSING BLVD

City MADISON State WI Zip Code 53718

Purpose of Disbursement
STAFF LODGING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.I21755

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MILEAGE

Mailing Address

City State Zip Code

Purpose of Disbursement
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.I21733

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. JOSEPH FADNESS

Mailing Address 9506 S RYAN GREEN CT

City FRANKLIN State WI Zip Code 53132-2237

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.I21637

Amount of Each Disbursement this Period

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

M M M / D D D / Y Y Y Y Y Y
04 / 15 / 2015

Transaction ID : SB30B.I21634

Amount of Each Disbursement this Period

701.63

Full Name (Last, First, Middle Initial)

B. BEN GILES

Mailing Address 1510 TRIPP CIRCLE

City MADISON State WI Zip Code 53706

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
04 / 15 / 2015

Transaction ID : SB30B.I21615

Amount of Each Disbursement this Period

323.14

Full Name (Last, First, Middle Initial)

C. 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 M / D D D / Y Y Y Y Y Y
04 / 15 / 2015

Transaction ID : SB30B.I21643

Amount of Each Disbursement this Period

1315.48

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

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

2340.25

**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. AMY HASENBERG

Mailing Address 217 S MILLS STREET

City MADISON State WI Zip Code 53715

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.I21612

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. BENJAMIN HEATH

Mailing Address 620 N CARROL 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.I21616

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. DONNA HEIMBACH

Mailing Address 3002 DIANNE DRIVE

City MIDDLETON State WI Zip Code 53562-2425

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.I21628

Amount of Each Disbursement this Period

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. CHRISTOPHER JENKYNS

Mailing Address 463 PARK PLACE

City KEWASKUM State WI Zip Code 53040

Purpose of Disbursement
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2015

Transaction ID : SB30B.I21622

Amount of Each Disbursement this Period

43.50

Category/
Type

Full Name (Last, First, Middle Initial)

B. MILEAGE

Mailing Address

City State Zip Code

Purpose of Disbursement
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2015

Transaction ID : SB30B.I21756

Amount of Each Disbursement this Period

43.50

Category/
Type

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER JENKYNS

Mailing Address 463 PARK PLACE

City KEWASKUM State WI Zip Code 53040

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2015

Transaction ID : SB30B.I21623

Amount of Each Disbursement this Period

1091.26

Category/
Type

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

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

1134.76

**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. 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

MM / DD / YYYY
04 / 15 / 2015

Transaction ID : SB30B.I21642

Amount of Each Disbursement this Period

500.58

Full Name (Last, First, Middle Initial)

B. ALEXANDER MANDRY

Mailing Address 513 LEWIS STREET

City BURLINGTON State WI Zip Code 53105

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
04 / 15 / 2015

Transaction ID : SB30B.I21609

Amount of Each Disbursement this Period

536.66

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER MARTIN

Mailing Address 6725 HAMMERSLEY ROAD
APT 1

City MADISON State WI Zip Code 53711

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
04 / 15 / 2015

Transaction ID : SB30B.I21625

Amount of Each Disbursement this Period

1530.69

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

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

2567.93

**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. RAMON ORTIZ

Mailing Address 5110 CAMDEN ROAD

City MADISON State WI Zip Code 53716

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.I21646

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. 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.I21651

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. 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.I21633

Amount of Each Disbursement this Period

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

/ /

Transaction ID : SB30B.I21629

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. MILEAGE

Mailing Address

City State Zip Code

Purpose of Disbursement
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.I21757

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.I21630

Amount of Each Disbursement this Period

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

/ /

Transaction ID : SB30B.I21619

Amount of Each Disbursement this Period

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

/ /

Transaction ID : SB30B.I21640

Amount of Each Disbursement this Period

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.I21654

Amount of Each Disbursement this Period

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

/ /

Transaction ID : SB30B.I21655

Amount of Each Disbursement this Period

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

/ /

Transaction ID : SB30B.I21657

Amount of Each Disbursement this Period

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

/ /

Transaction ID : SB30B.I21660

Amount of Each Disbursement this Period

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 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
04 / 15 / 2015

Transaction ID : SB30B.I21661

Amount of Each Disbursement this Period

10.83

Full Name (Last, First, Middle Initial)

B. 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
04 / 15 / 2015

Transaction ID : SB30B.I21665

Amount of Each Disbursement this Period

109.86

Full Name (Last, First, Middle Initial)

C. 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
04 / 15 / 2015

Transaction ID : SB30B.I21667

Amount of Each Disbursement this Period

85.68

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

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

206.37

**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. DEAN CARE

Mailing Address P.O. BOX 673111

City State Zip Code
CHICAGO IL 60695

Purpose of Disbursement
HEALTH INSURANCE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	1	5

Transaction ID : SB30B.I21669

Amount of Each Disbursement this Period

1	6	6	8	.	4	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. DELTA DENTAL

Mailing Address P.O. BOX 828

City State Zip Code
STEVENS POINT WI 54481

Purpose of Disbursement
DENTAL INSURANCE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	1	5

Transaction ID : SB30B.I21670

Amount of Each Disbursement this Period

3	1	4	.	6	5
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. RICHARD DICKIE

Mailing Address 126 N. BLAIR ST. #1

City State Zip Code
MADISON WI 53703

Purpose of Disbursement
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	5

Transaction ID : SB30B.I21647

Amount of Each Disbursement this Period

5	5	.	0	0
---	---	---	---	---

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

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

2	0	3	8	.	0	5
---	---	---	---	---	---	---

2	0	3	8	.	0	5
---	---	---	---	---	---	---

**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. GLASS NICKEL PIZZA

Mailing Address 2916 ATWOOD AVENUE

City MADISON State WI Zip Code 53704

Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.I21759

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.I21648

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. CATHERINE DILLON

Mailing Address 3612 CALVEND LANE

City KENSINGTON State MD Zip Code 20895

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.I21620

Amount of Each Disbursement this Period

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. JOSEPH FADNESS

Mailing Address 9506 S RYAN GREEN CT

City FRANKLIN State WI Zip Code 53132-2237

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
04 / 30 / 2015

Transaction ID : SB30B.I21638

Amount of Each Disbursement this Period

2835.82

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
04 / 30 / 2015

Transaction ID : SB30B.I21635

Amount of Each Disbursement this Period

682.51

Full Name (Last, First, Middle Initial)

C. BEN GILES

Mailing Address 1510 TRIPP CIRCLE

City MADISON State WI Zip Code 53706

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
04 / 30 / 2015

Transaction ID : SB30B.I21614

Amount of Each Disbursement this Period

392.06

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

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

3910.39

**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 M / D D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : SB30B.I21644

Amount of Each Disbursement this Period

1315.48

Full Name (Last, First, Middle Initial)

B. AMY HASENBERG

Mailing Address 217 S MILLS STREET

City MADISON State WI Zip Code 53715

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
04 / 30 / 2015

Transaction ID : SB30B.I21611

Amount of Each Disbursement this Period

296.50

Full Name (Last, First, Middle Initial)

C. BENJAMIN HEATH

Mailing Address 620 N CARROL 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
04 / 30 / 2015

Transaction ID : SB30B.I21617

Amount of Each Disbursement this Period

1263.65

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

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

2875.63

**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 53562-2425

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	5

Transaction ID : SB30B.I21627

Amount of Each Disbursement this Period

6	8	8	.	2	1
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER JENKYN

Mailing Address 463 PARK PLACE

City KEWASKUM State WI Zip Code 53040

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	5

Transaction ID : SB30B.I21624

Amount of Each Disbursement this Period

1	0	9	.	1	2	5
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. 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) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	5

Transaction ID : SB30B.I21641

Amount of Each Disbursement this Period

5	5	3	.	1	4
---	---	---	---	---	---

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

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

2	3	3	.	6	0
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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 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. ALEXANDER MANDRY

Mailing Address 513 LEWIS STREET

City BURLINGTON State WI Zip Code 53105

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.I21610

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER MARTIN

Mailing Address 6725 HAMMERSLEY ROAD
APT 1

City MADISON State WI Zip Code 53711

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.I21626

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. RAMON ORTIZ

Mailing Address 5110 CAMDEN ROAD

City MADISON State WI Zip Code 53716

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.I21645

Amount of Each Disbursement this Period

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. 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.I21650

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. 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.I21632

Amount of Each Disbursement this Period

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.I21631

Amount of Each Disbursement this Period

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

/ /

Transaction ID : SB30B.I21618

Amount of Each Disbursement this Period

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

/ /

Transaction ID : SB30B.I21639

Amount of Each Disbursement this Period

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.I21653

Amount of Each Disbursement this Period

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

/ /

Transaction ID : SB30B.I21656

Amount of Each Disbursement this Period

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

/ /

Transaction ID : SB30B.I21658

Amount of Each Disbursement this Period

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

/ /

Transaction ID : SB30B.I21659

Amount of Each Disbursement this Period

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 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

M M M / D D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : SB30B.I21662

Amount of Each Disbursement this Period

10.83

Full Name (Last, First, Middle Initial)

B. 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

M M M / D D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : SB30B.I21664

Amount of Each Disbursement this Period

123.02

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

M M M / D D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : SB30B.I21666

Amount of Each Disbursement this Period

93.88

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

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

227.73

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. 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	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		3	0		2	0	1	5		

Transaction ID : SB30B.I21668

Amount of Each Disbursement this Period

1	1	3	.	3	1
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B.

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

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

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

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

Amount of Each Disbursement this Period

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

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

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

1	1	3	.	3	1
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5	0	8	2	9	.	3	0
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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 : MCW051815A

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	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
REPUBLICAN PARTY OF WI - STATE ACCOUNT	MM / DD / YYYY 04 / 07 / 2015	854.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	854.00
Transaction ID : AB051915	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL 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 WI - STATE ACCOUNT	DATE OF RECEIPT MM / DD / YYYY 04 / 14 / 2015	TOTAL AMOUNT TRANSFERRED 1086.43
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BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	1086.43
Transaction ID : AG051915	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL 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	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
REPUBLICAN PARTY OF WI - STATE ACCOUNT	MM / DD / YYYY 04 / 20 / 2015	4237.40

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	4237.40
Transaction ID : AC051915	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL 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 WI - STATE ACCOUNT	DATE OF RECEIPT MM / DD / YYYY 04 / 27 / 2015	TOTAL AMOUNT TRANSFERRED 2654.20
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BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	2654.20
Transaction ID : CC051915	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL 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	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
REPUBLICAN PARTY OF WI - STATE ACCOUNT	MM / DD / YYYY 04 / 28 / 2015	1757.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	1757.00
Transaction ID : DD051915	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	10589.03
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred).....	10589.03

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Form A: Best Buds LLC, Transaction ID: A051815. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Snow Removal), and Allocated Activity or Event (Administrative checked). Totals: FEDERAL SHARE 30.00, NONFEDERAL SHARE 170.00, TOTAL AMOUNT 200.00.

Form B: PITNEY BOWES CREDIT CORPORATION, Transaction ID: B051815. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (COPIER LEASE), and Allocated Activity or Event (Administrative checked). Totals: FEDERAL SHARE 120.71, NONFEDERAL SHARE 684.00, TOTAL AMOUNT 804.70.

Form C: ADVANCED DISPOSAL, Transaction ID: C051815. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (WASTE REMOVAL), and Allocated Activity or Event (Administrative checked). Totals: FEDERAL SHARE 56.92, NONFEDERAL SHARE 322.52, TOTAL AMOUNT 379.44.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 207.63, NONFEDERAL SHARE 1176.52, TOTAL AMOUNT 1384.14.

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

Summary table for total: 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 : D051515
CENTURY SPRINGS BOTTLING CO
Mailing Address PO BOX 275
City GENESEE DEPOT State WI Zip Code 53127
Purpose of Disbursement: BOTTLED WATER
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 46936.96
Date 04 / 14 / 2015
FEDERAL SHARE 5.18 + NONFEDERAL SHARE 29.33 = TOTAL AMOUNT 34.50

B. Full Name (Last, First, Middle Initial) Transaction ID : E051815
IMPACT ACQUISITIONS LLC
Mailing Address 75 REMITTANCE DRIVE
City CHICAGO State IL Zip Code 60675
Purpose of Disbursement: OFFICE EQUIPMENT
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 47210.73
Date 04 / 14 / 2015
FEDERAL SHARE 41.07 + NONFEDERAL SHARE 232.70 = TOTAL AMOUNT 273.77

C. Full Name (Last, First, Middle Initial) Transaction ID : F051815
KONICA MINOLTA
Mailing Address PO BOX 740423
City ATLANTA State GA Zip Code 30374
Purpose of Disbursement: COPIER LEASE
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 47399.30
Date 04 / 14 / 2015
FEDERAL SHARE 28.29 + NONFEDERAL SHARE 160.28 = TOTAL AMOUNT 188.57

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 74.54, 422.31, 496.84

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

Form A: TDS METROCOM, Transaction ID: G051815. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (OFFICE PHONES), and Allocated Activity or Event (Administrative checked). Total amount: 359.21.

Form B: VERIZON WIRELESS, Transaction ID: H051815. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (WIRELESS INTERNET), and Allocated Activity or Event (Administrative checked). Total amount: 42.66.

Form C: EASY PERMIT POSTAGE, Transaction ID: J051815. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (POSTAGE FOR METER), and Allocated Activity or Event (Administrative checked). Total amount: 4983.09.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 807.74, NONFEDERAL SHARE 4577.22, TOTAL AMOUNT 5384.96.

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

Summary table for total: 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 : K051815
NESTLE PURE LIFE
Mailing Address PO BOX 856680
City LOUISVILLE State KY Zip Code 40285
Purpose of Disbursement: OFFICE WATER
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 52786.35
Date 04 / 21 / 2015
FEDERAL SHARE 0.31 + NONFEDERAL SHARE 1.78 = TOTAL AMOUNT 2.09

B. Full Name (Last, First, Middle Initial) Transaction ID : L051815
MG&E
Mailing Address PO BOX 1231
City MADISON State WI Zip Code 53701
Purpose of Disbursement: UTILITIES
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 53766.15
Date 04 / 27 / 2015
FEDERAL SHARE 146.97 + NONFEDERAL SHARE 832.83 = TOTAL AMOUNT 979.80

C. Full Name (Last, First, Middle Initial) Transaction ID : M051815
PRO ONE JANITORIAL INC
Mailing Address 1101 ASHWAUBENON STREET
City GREEN BAY State WI Zip Code 54304
Purpose of Disbursement: CUSTODIAL SERVICES
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 54266.15
Date 04 / 27 / 2015
FEDERAL SHARE 75.00 + NONFEDERAL SHARE 425.00 = TOTAL AMOUNT 500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 222.28, 1259.61, 1481.89

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

Form A: TDS METROCOM, Transaction ID: N051515. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (OFFICE PHONES), and Allocated Activity or Event (Administrative checked). Totals: FEDERAL SHARE 51.15, NONFEDERAL SHARE 289.87, TOTAL AMOUNT 341.02.

Form B: TDS METROCOM, Transaction ID: P051515. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (OFFICE PHONES), and Allocated Activity or Event (Administrative checked). Totals: FEDERAL SHARE 195.27, NONFEDERAL SHARE 1106.50, TOTAL AMOUNT 1301.77.

Form C: BMO HARRIS BANK, Transaction ID: Q051815. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (CREDIT CARD PAYMENT *SEE ITEMIZATION*), and Allocated Activity or Event (Administrative checked). Totals: FEDERAL SHARE 37.53, NONFEDERAL SHARE 212.64, TOTAL AMOUNT 250.17.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 283.95, NONFEDERAL SHARE 1609.01, TOTAL AMOUNT 1892.96.

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

Summary table for total: 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 : R051815
BMO HARRIS BANK
Mailing Address PO BOX 3052
City MILWAUKEE State WI Zip Code 53201
Purpose of Disbursement: CREDIT CARD PAYMENT *SEE ITEMIZATION*
Allocated Activity or Event: Administrative [checked] Fundraising [] Exempt []
Date 04 / 28 / 2015
FEDERAL SHARE 272.53 + NONFEDERAL SHARE 1544.36 = TOTAL AMOUNT 1816.89

B. Full Name (Last, First, Middle Initial) Transaction ID : AA051815
AMAZON.COM
Mailing Address 410 TERRY AVENUE N
City SEATTLE State WA Zip Code 98109
Purpose of Disbursement: OFFICE SUPPLIES
Allocated Activity or Event: Administrative [checked] Fundraising [] Exempt []
Date 03 / 23 / 2015
FEDERAL SHARE 7.51 + NONFEDERAL SHARE 42.58 = TOTAL AMOUNT 50.09

C. Full Name (Last, First, Middle Initial) Transaction ID : AB051815
AMAZON.COM
Mailing Address 410 TERRY AVENUE N
City SEATTLE State WA Zip Code 98109
Purpose of Disbursement: OFFICE SUPPLIES
Allocated Activity or Event: Administrative [checked] Fundraising [] Exempt []
Date 03 / 24 / 2015
FEDERAL SHARE 1.58 + NONFEDERAL SHARE 8.96 = TOTAL AMOUNT 10.54

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 272.53, 1544.36, 1816.89

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: [blank], [blank], [blank]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Form A: PINKUS MCBRIDE, Transaction ID: CC051515. Allocated Activity or Event: Administrative. Purpose: STAFF MEALS. Date: 03/24/2015. Total Amount: 18.48.

Form B: AMAZON.COM, Transaction ID: DD051815. Allocated Activity or Event: Administrative. Purpose: OFFICE SUPPLIES. Date: 03/26/2015. Total Amount: 19.95.

Form C: PINKUS MCBRIDE, Transaction ID: EE051515. Allocated Activity or Event: Administrative. Purpose: MEETING EXPENSE. Date: 03/26/2015. Total Amount: 1.99.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

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

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

Form A: PINKUS MCBRIDE, Transaction ID: FF051815. Allocated Activity or Event: Administrative. Date: 03/31/2015. Total Amount: 14.07.

Form B: OFFICE DEPOT, Transaction ID: GG051815. Allocated Activity or Event: Administrative. Date: 04/06/2015. Total Amount: 75.49.

Form C: OFFICE MAX, Transaction ID: HH051815. Allocated Activity or Event: Administrative. Date: 04/07/2015. Total Amount: 59.56.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

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

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

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Form A: PINKUS MCBRIDE, Transaction ID: KK051815. Allocated Activity or Event: Administrative. Date: 02/09/2015. Total Amount: 1.99.

Form B: OFFICE DEPOT, Transaction ID: LL051815. Allocated Activity or Event: Administrative. Date: 02/09/2015. Total Amount: 218.23.

Form C: AMAZON.COM, Transaction ID: MM051815. Allocated Activity or Event: Administrative. Date: 02/11/2015. Total Amount: 24.70.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

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

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

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Form A: Amazon.com, Transaction ID: NN051815. Allocated Activity: Administrative. Amount: 41.88. Date: 02/17/2015.

Form B: Amazon.com, Transaction ID: OO051815. Allocated Activity: Administrative. Amount: 41.88. Date: 02/17/2015.

Form C: PINKUS MCBRIDE, Transaction ID: PP051815. Allocated Activity: Administrative. Amount: 6.59. Date: 02/16/2015.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

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

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

Form A: Amazon.com, Transaction ID: QQ051515. Allocated Activity or Event: Administrative. Date: 02/17/2015. Total Amount: 41.88.

Form B: Amazon.com, Transaction ID: RR051915. Allocated Activity or Event: Administrative. Date: 02/19/2015. Total Amount: 64.34.

Form C: PINKUS MCBRIDE, Transaction ID: SS051915. Allocated Activity or Event: Administrative. Date: 02/20/2015. Total Amount: 14.58.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

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

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

Form A: Full Name (Last, First, Middle Initial) AMAZON.COM, Transaction ID : TT051815, Allocated Activity or Event: Administrative, Date: 02/20/2015, Total Amount: 168.78

Form B: Full Name (Last, First, Middle Initial) AMAZON.COM, Transaction ID : UU051815, Allocated Activity or Event: Administrative, Date: 02/24/2015, Total Amount: 168.78

Form C: Full Name (Last, First, Middle Initial) AMAZON.COM, Transaction ID : VV051815, Allocated Activity or Event: Administrative, Date: 02/25/2015, Total Amount: 168.78

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

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

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

Form A: BEST BUY. Transaction ID: XX051815. Allocated Activity or Event: Administrative (checked). Date: 03/04/2015. Total Amount: 316.50.

Form B: OFFICE DEPOT. Transaction ID: YY051815. Allocated Activity or Event: Administrative (checked). Date: 03/12/2015. Total Amount: 537.98.

Form C: Empty form for disbursement entry.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 1868.67, 10589.03, 12457.68.