

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

SCOTT WALKER INC

ADDRESS (number and street) PO BOX 620066

(Check if address is changed)

MIDDLETON CITY ▲ WI STATE ▲ 53562 ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS (Check if address is changed) ASPECTRFAI@GMAIL.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed)

2. DATE 11 / 25 / 2020

3. FEC IDENTIFICATION NUMBER ▶ C C00580480

4. IS THIS STATEMENT NEW (N) OR AMENDED (A)

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

Type or Print Name of Treasurer TEASDALE, KATE, , ,

Signature of Treasurer TEASDALE, KATE, , , [Electronically Filed] Date 11 / 25 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.