

7th District Republican Party of Wisconsin

120 W. Chiquama Street
Cadott, WI 54727

Phone (715) 289-3344
Fax (715) 289-4443
Email liplegals@discover.net

December 7, 2000

Federal Elections Committee
999 E Street NW
Washington, DC 20463

BY CERTIFIED MAIL

RECEIVED
FEDERAL ROOM
2000 DEC 12 12 21 PM

**RE: 7th Congressional Dist. Republican Party of Wisconsin;
C00188078; post-general Report (10/19/00 - 11/27/00)**

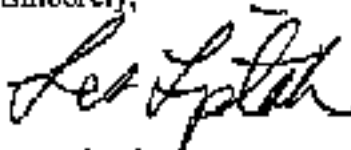
Dear Sir or Ms.:

Enclosed please find the Post-general Report of the above described entity.

The receipts on line 12 come from associations listed under Wisconsin Elections Board auspices and are subject to the Wisconsin Elections Board rules, which rules are equal to, or stronger, than the Federal rules. This includes the fact that no corporate monies are involved.

Thank you for your time. Should there be any question or concern, feel free to contact me at the numbers listed above.

Sincerely,




Les Liptak,
Treasurer

tlv/HT.

enclosure

12/7/00
Hi!
Hope you don't mind "
This attachment.
What about the fiasco
in Florida, huh?!



REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 DEC 12 P 2 14

USE FEC MAILING LABEL OR TYPE OR PRINT

| | |
|--|--|
| 1. NAME OF COMMITTEE (in full) 7th Congressional District Republican Party of Wisconsin | 2. FEC IDENTIFICATION NUMBER C00100078 |
| ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 120 W. Chippewa Street | 3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M) |
| CITY, STATE and ZIP CODE Cadott, WI 54727 | |

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report

Monthly Report Due On:

- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |

- 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election on 11/7/00 in the State of Wisconsin

(b) Is this Report an Amendment? YES NO

| SUMMARY | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------|---|
| 6. Covering Period <u>10/19/00</u> through <u>11/27/00</u> | | |
| 6. (a) Cash on Hand January 1, 19 <u>2000</u> | | \$ 4256.05 |
| (b) Cash on Hand at Beginning of Reporting Period | \$ 2061.88 | |
| (c) Total Receipts (from Line 19) | \$ 1250.00 | \$ 9631.64 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(e) and 6(c) for Column B) | \$ 3311.88 | \$ 13887.69 |
| 7. Total Disbursements (from Line 30) | \$ 2224.00 | \$ 12799.81 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | \$ 1087.88 | \$ 1087.88 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | \$ -0- | For further information contact: Federal Election Commission 969 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-894-1100 |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | \$ -0- | |

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
Lester H. Liptak

Signature of Treasurer

Lester H. Liptak

Date
12/07/00

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

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|

FEC FORM 3X
(revised 9/99)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEO FORM 0X**

(rev. 1/1/01)

| NAME OF COMMITTEE | | REPORT COVERING PERIOD | |
|--|---|-------------------------------|---------------------------|
| 7th Congressional District Republican Party of Wisconsin | | FROM 10/19/00 | TO: 11/27/00 |
| | | COLUMN A Total This Period | COLUMN B Calendar Year |
| I. Receipts | | | |
| 11. | Contributions (other than loans) From: | | |
| a. | Individuals/Persons Other Than Political Committees | | 1730.00 |
| i. | Itemized (use Schedule A) | | 1941.64 |
| ii. | Unitemized | | 3671.64 |
| | (add i and ii) > | | |
| b. | Political Party Committees | | |
| c. | Other Political Committees (such as PACs) | | 3671.64 |
| d. | Total Contributions | | 3671.64 |
| | (add a, b, and c) > | | |
| 12. | Transfers From Affiliated/Other Party Committees | 750.00 | 5460.00 |
| 13. | All Loans Received | | |
| 14. | Loan Repayments Received | | |
| 15. | Offsets To Operating Expenditures (Refunds, Rebates, etc.) | | |
| 16. | Refunds of Contributions Made to Federal Candidates and Other Political Committees | 500.00 | 500.00 |
| 17. | Other Federal Receipts (Dividends, Interest, etc.) | | |
| 18. | Transfers from Nonfederal Account for Joint Activity | | |
| 19. | Total Receipts | 1250.00 | 9631.64 |
| | (add 11d, 12, 13, 14, 15, 16, 17, and 18) > | | |
| 20. | Total Federal Receipts | 1250.00 | 9631.64 |
| | (subtract line 18 from line 19) > | | |
| II. Disbursements | | | |
| 21. | Operating Expenditures: | | |
| a. | Shared Federal/Non-Federal Activity (from Schedule H4) | | |
| i. | Federal Share | | |
| ii. | Non-Federal Share | | |
| b. | Other Federal Operating Expenditures | 224.00 | 3799.81 |
| c. | Total Operating Expenditures | 224.00 | 3799.81 |
| | (add a i, a ii, and b) > | | |
| 22. | Transfers to Affiliated/Other Party Committees | | |
| 23. | Contributions to Federal Candidates/Committees and Other Political Committees | 2000.00 | 9000.00 |
| 24. | Independent Expenditures (use Schedule E) | | |
| 25. | Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) | | |
| 26. | Loan Repayments Made | | |
| 27. | Loans Made | | |
| 28. | Refunds of Contributions To: | | |
| a. | Individuals/Persons Other Than Political Committees | | |
| b. | Political Party Committees | | |
| c. | Other Political Committees (such as PACs) | | |
| d. | Total Contribution Refunds | | |
| | (add a, b and c) > | | |
| 29. | Other Disbursements | | |
| 30. | Total Disbursements | 2224.00 | 12799.81 |
| | (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) > | | |
| 31. | Total Federal Disbursements | 2224.00 | 12799.81 |
| | (subtract line 21 a ii from line 30) > | | |
| III. Net Contributions/Operating Expenditures | | | |
| 32. | Total Contributions (other than loans)(from line 11d) | -0- | 3671.64 |
| 33. | Total Contribution Refunds (from line 28d) | -0- | -0- |
| 34. | Net Contributions (other than loans)(subtract line 33 from 32) | -0- | 3671.64 |
| 35. | Total Federal Operating Expenditures | 224.00 | 3799.81 |
| | (add 21 a i and 21 b) > | | |
| 36. | Offsets to Operating Expenditures (from line 15) | -0- | -0- |
| 37. | Net Operating Expenditures | 224.00 | 3799.81 |
| | (subtract line 36 from 35) > | | |

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 12

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)

7th Congressional District Republican Party of Wisconsin

| | | | |
|---|--|--|---|
| <p>A. Full Name, Mailing Address and ZIP Code Citizens for Tim Hoven P.O. Box 593 Port Washington, WI 53074</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 250.00</p> | <p>Date (month, day, year) 11/3/00</p> | <p>Amount of Each Receipt this Period \$ 250.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code Friends for Foti P.O. Box 241 Oconomowoc, WI 53066</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 250.00</p> | <p>Date (month, day, year) 11/3/00</p> | <p>Amount of Each Receipt this Period \$ 500.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only) **\$ 750.00**

SCHEDULE A

ITEMIZED RECEIPTS

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

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)

7th Congressional District Republican Party of Wisconsin

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|---|-------------------------|------------------------------------|
| Dahnlow for Assembly 1320 N. Minnow Lake Rd; #202 Phillips, WI 54535 | 7th Dist contrib ck dated 10/28/00 was returned uncashed. | 11/8/00 | \$ 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General | Occupation | Aggregate Year-to-Date | \$ 500/.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General | Occupation | Aggregate Year-to-Date | \$ |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General | Occupation | Aggregate Year-to-Date | \$ |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General | Occupation | Aggregate Year-to-Date | \$ |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General | Occupation | Aggregate Year-to-Date | \$ |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General | Occupation | Aggregate Year-to-Date | \$ |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General | Occupation | Aggregate Year-to-Date | \$ |

SUBTOTAL of Receipts This Page (optional)
TOTAL This Period (last page this line number only) \$ 500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

| | | |
|---|------|----|
| Use separate schedule(s) for each category of the Detailed Summary Page | PAGE | OF |
| | 1 | 1 |
| FOR LINE NUMBER | | |
| 21b | | |

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)
 7th Congressional District Republican Party of Wisconsin

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Tom Flaschberger Rt. 2, Bx 2357 Hayward, WI 54843 | reimburse of expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) operational | 10/21/00 | \$ 224.00 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |

| | |
|--|-----------|
| SUBTOTAL of Disbursements This Page (optional) | |
| TOTAL This Period (last page this line number only) | \$ 224.00 |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 23

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)

7th Congressional District Republican Party of Wisconsin

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement contribution | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| Cronin for Congress P.O. Box 617 Schofield, WI 54476 | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/23/00 | \$ 1000.00 |
| B. Full Name, Mailing Address and ZIP Code Dehmlow for Assembly 1320 N. Minnow Lake Rd. #202 Phillips, WI 54535 | Purpose of Disbursement contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/28/00 | \$ 500.00 |
| C. Full Name, Mailing Address and ZIP Code Dehmlow for Assembly 1320 N. Minnow Lake Rd. #202 Phillips, WI 54535 | Purpose of Disbursement contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 11/3/00 | \$ 500.00 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page use line number only)

\$ 2000.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

| | |
|---|--------------------------------------|
| <input type="checkbox"/> Hand Delivered | Date of Receipt |
| <input type="checkbox"/> First Class Mail | POSTMARKED |
| <input checked="" type="checkbox"/> Registered/Certified Mail | POSTMARKED (R/C) <i>12/7/00</i> |
| <input type="checkbox"/> No Postmark | |
| <input type="checkbox"/> Postmark Illegible | |
| <input type="checkbox"/> Received from the House office of Records and Registration | Date of Receipt |
| <input type="checkbox"/> Received from the Senate Office of Public Records | Date of Receipt |
| <input type="checkbox"/> Other (Specify): | Postmarked and/or Date of Receipt |
| <input type="checkbox"/> Electronic Filing | |
| <i>ROM</i> PREPARER | <i>12/12/00</i> DATE PREPARED |