

**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

REPUBLICAN PARTY OF WISCONSIN

ADDRESS (number and street)

148 E. JOHNSON STREET

☐ (Check if address is changed)

MADISON

CITY ▲

WI

STATE ▲

53703

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐ (Check if address is changed)

edietsch@wisgop.org

Optional Second E-Mail Address

kate@lindweininger.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

www.wisgop.org

2. DATE

MM / DD / YYYY
01 / 31 / 2012

3. FEC IDENTIFICATION NUMBER ►

C C00074450

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 Bob Geason

Signature of Treasurer Bob Geason

[Electronically Filed]

Date

MM / DD / YYYY
09 / 04 / 2012

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.

Office
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 06/2012)

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) ☐ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation Office Sought: ☐ House ☐ Senate ☐ President State District

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) ☒ This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- ☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization
- ☐ Membership Organization ☐ Trade Association ☐ Cooperative
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- ☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	_____	FEC ID number	<input type="text" value="C"/>
2.	_____	FEC ID number	<input type="text" value="C"/>
3.	_____	FEC ID number	<input type="text" value="C"/>
4.	_____	FEC ID number	<input type="text" value="C"/>

Write or Type Committee Name

REPUBLICAN PARTY OF WISCONSIN

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

RIBBLE RESPONSIBLE GOVERNMENT COMMITTEE

Mailing Address

PO BOX 30844

BETHESDA

CITY

MD

STATE

20824

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☒ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Elise Dietsch

Mailing Address

1100 Glenview Drive

Baraboo

CITY

WI

STATE

53913

ZIP CODE

Title or Position

Controller

Telephone number

608

256

8031

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name
of Treasurer

Bob Geason

Mailing Address

440 Edward St

Burlington

CITY

WI

STATE

53105

ZIP CODE

Title or Position
Treasurer

Telephone number

608

257

4765

Full Name of
Designated
Agent

Stephan Thompson

Mailing Address

148 E Johnson Street

Madison

CITY

WI

STATE

53703

ZIP CODE

Title or Position

Executive Director

Telephone number

608

239

0589

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

M&I Bank

Mailing Address

1 W Main St

Madison

CITY

WI

STATE

53703-0000

ZIP CODE

Name of Bank, Depository, etc.

Wachovia Bank

Mailing Address

7901 Wisconsin Avenue

MD 1010

Bethesda

CITY

MD

STATE

20814

ZIP CODE

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1G (Revised 06/2011)

Page 5

Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

[ADDITIONAL]

BB&T

Mailing Address

1909 K St NW

Washington

DC

20006

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

TARGET STATE VICTORY FUND

Mailing Address

1609 SHOAL CREEK BLVD STE 203

AUSTIN

TX

78711

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

☐

Connected Organization

☐

Affiliated Committee

☒

Joint Fundraising Representative

☐

Leadership PAC Sponsor

[ADDITIONAL]

Designated Agent

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C