

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5  
REPUBLICAN PARTY OF WISCONSIN

ADDRESS (number and street) 148 E. JOHNSON STREET  
Check if different than previously reported. (ACC) MADISON WI 53703

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C C00074450 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 M M M / D D D / Y Y Y Y Y Y in the State of  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 06 / 01 / 2012 through 06 / 30 / 2012

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 Bob Geason

Signature of Treasurer Bob Geason [Electronically Filed] Date 07 / 20 / 2012

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="2012"/>	<input type="text" value="963916.69"/>	<input type="text" value="963916.69"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1667602.17"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="230077.58"/>	<input type="text" value="1913968.55"/>
(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="1897679.75"/>	<input type="text" value="2877885.24"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="439122.83"/>	<input type="text" value="1419328.32"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1458556.92"/>	<input type="text" value="1458556.92"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**REPUBLICAN PARTY OF WISCONSIN**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	34180.00	335710.00
(ii) Unitemized .....	102193.36	682871.47
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	136373.36	1018581.47
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2975.21	47555.26
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	139348.57	1066136.73
12. Transfers From Affiliated/Other Party Committees.....	26983.51	756636.31
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).....	63745.50	91195.51
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).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	230077.58	1913968.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	230077.58	1913968.55

# DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	3572.51	43665.28
(ii) Non-Federal Share.....	6351.12	77627.07
(b) Other Federal Operating Expenditures .....	120679.92	354976.58
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	130603.55	476268.93
22. Transfers to Affiliated/Other Party Committees.....	175000.00	427307.50
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 .....	1300.00	31460.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	1300.00	33460.00
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 .....	132219.28	482291.89
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	132219.28	482291.89
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	439122.83	1419328.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	432771.71	1341701.25

**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) .....	139348.57	1066136.73
34. Total Contribution Refunds (from Line 28(d)) .....	1300.00	33460.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	138048.57	1032676.73
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	124252.43	398641.86
37. Offsets to Operating Expenditures (from Line 15, page 3).....	63745.50	91195.51
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	60506.93	307446.35

**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 122  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF WISCONSIN**

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

Mailing Address 718 South Drake Avenue

City Marshfield      State WI      Zip Code 54449-3547

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 22 / 2012  
**Transaction ID : SA11AI.80433**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 15 Turnwood Cir

City Verona      State WI      Zip Code 53593-7942

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

Name of Employer Occupation  
H. Care Center Registered Nurse

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  
 06 / 25 / 2012  
**Transaction ID : SA11AI.80769**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 14 Quail Ridge Dr

City Madison      State WI      Zip Code 53717-1071

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

Name of Employer Occupation  
IBM Process Architect

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 07 / 2012  
**Transaction ID : SA11AI.78434**

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 650.00

**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 7 OF 122  
(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. Gregory Babcock**

Mailing Address 266 Saint Andrews Drive

City Hudson State WI Zip Code 54016-8072

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

Name of Employer Embraer Occupation Aircraft Sales

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 08 / 2012  
**Transaction ID : SA11AI.82041**

Amount of Each Receipt this Period  
500.00

Best Efforts Compliance

**[MEMO ITEM]**

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

Mailing Address 930 - 25th Place

City Wisconsin Rapids State WI Zip Code 54494-3199

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 ▼  
430.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 18 / 2012  
**Transaction ID : SA11AI.79333**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 201 Seabreeze Court

City Vero Beach State FL Zip Code 32963-9508

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 ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 22 / 2012  
**Transaction ID : SA11AI.80535**

Amount of Each Receipt this Period  
500.00

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

**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 8 OF 122  
(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. Susan V Brunoff**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 334 West Cedar Street  
 City State Zip Code  
 New Holland PA 17557-1202  
 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 ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 25 / 2012  
**Transaction ID : SA11AI.80805**  
 Amount of Each Receipt this Period  
 80.00

**B. Mary Bustrin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13259 N. Lakewood Dr #3w  
 City State Zip Code  
 Mequon WI 53097-2408  
 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  
 06 / 27 / 2012  
**Transaction ID : SA11AI.81660**  
 Amount of Each Receipt this Period  
 250.00

**C. Elizabeth A Bundy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2075 Fair Avenue  
 City State Zip Code  
 Columbus OH 43209-1637  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Russel T Bundy Assc Inc Treasurer  
 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  
 06 / 27 / 2012  
**Transaction ID : SA11AI.81556**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 580.00  
**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 9 OF 122  
(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. Charles Russ Campbell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2308 Meadowcroft Lane  
 City Grayslake State IL Zip Code 60030-4411  
 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 M / D D D / Y Y Y Y Y Y  
 06 / 07 / 2012  
**Transaction ID : SA11AI.78557**  
 Amount of Each Receipt this Period  
 250.00

**B. Claire M Clark**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9283 Spring Forest Drive  
 City Indianapolis State IN Zip Code 46260-1267  
 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 M / D D D / Y Y Y Y Y Y  
 06 / 04 / 2012  
**Transaction ID : SA11AI.77266**  
 Amount of Each Receipt this Period  
 250.00

**C. Margaret E Clemons**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address N88W5268 Covington Square  
 City Cedarburg State WI Zip Code 53012-1520  
 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 M / D D D / Y Y Y Y Y Y  
 06 / 19 / 2012  
**Transaction ID : SA11AI.79547**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00  
**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 10 OF 122  
(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. Alan Cobb**

Mailing Address 77 Wendover Way

City State Zip Code  
Bedford NH 03110-6056

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  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 26 / 2012  
**Transaction ID : SA11AI.81301**

Amount of Each Receipt this Period  
150.00

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

Mailing Address 10871 Blue Mountain Avenue

City State Zip Code  
Blue Mounds WI 53517-9402

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

Name of Employer Occupation  
NAMI Hvac

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  
 06 / 27 / 2012  
**Transaction ID : SA11AI.81619**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 118 North Bryant Street

City State Zip Code  
Kansas City MO 64119-3136

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

Name of Employer Occupation  
Cook Bros Insulation Inc Owner

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  
 06 / 27 / 2012  
**Transaction ID : SA11AI.81590**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00

**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 11 OF 122
	<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. Louis R D'Assalenaux IV**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2275 West 25th Street, SPC 18  
 City San Pedro State CA Zip Code 90732-5457  
 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 M / D D D / Y Y Y Y Y Y  
 06 / 04 / 2012  
**Transaction ID : SA11AI.77241**  
 Amount of Each Receipt this Period  
 100.00

**B. Maude C Dahlberg**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 352 West Skyline Drive  
 City Grantsburg State WI Zip Code 54840-7842  
 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 M / D D D / Y Y Y Y Y Y  
 06 / 18 / 2012  
**Transaction ID : SA11AI.79095**  
 Amount of Each Receipt this Period  
 100.00

**C. Ross Farnsworth**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 460 South Greenfield Road, Suite 2  
 City Mesa State AZ Zip Code 85206-2062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Farnsworth Companies Occupation Real Estate Developer  
 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  
 06 / 07 / 2012  
**Transaction ID : SA11AI.78202**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 12 OF 122  
(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. John M. Flesch**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5678 Ashbourne Ln  
 City Fitchburg State WI Zip Code 53711-6967  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Gordon Flesch Company Occupation Executive  
 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  
 06 / 07 / 2012  
**Transaction ID : SA11AI.78051**  
 Amount of Each Receipt this Period  
 1000.00

**B. William Greaves**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8851 N Bayside Drive  
 City Milwaukee State WI Zip Code 53217-1910  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 20 / 2012  
**Transaction ID : SA11AI.80071**  
 Amount of Each Receipt this Period  
 500.00

**C. Paul R Hamilton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 413 West Creek Street  
 City Fredericksburg State TX Zip Code 78624-3113  
 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 M / D D D / Y Y Y Y Y Y  
 06 / 19 / 2012  
**Transaction ID : SA11AI.79771**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00  
**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 13 OF 122  
(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. Mr. Lewis P Hanson**

Mailing Address W51N602 Cedar Reserve Circle

City Cedarburg State WI Zip Code 53012-2134

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 ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 18 / 2012  
**Transaction ID : SA11AI.79018**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 9747 Pebble Beach Drive

City Santee State CA Zip Code 92071-2016

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

Name of Employer Torrey Pines High School Occupation Teacher

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 22 / 2012  
**Transaction ID : SA11AI.80538**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 14901 Freeland Street

City Detroit State MI Zip Code 48227-2976

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 M / D D D / Y Y Y Y Y Y  
 06 / 25 / 2012  
**Transaction ID : SA11AI.80719**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00

**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 122
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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) <b>A. Krisitine Inman</b>		Date of Receipt
Mailing Address 1866 Northwest Aspen aVenue		<input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2012"/>
City	State	Zip Code
Portland	OR	97210-1211
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.78355</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Retired	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Burleigh Jacobs</b>		Date of Receipt
Mailing Address 1020 Madera Circle		<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2012"/>
City	State	Zip Code
Elm Grove	WI	53122-2126
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.81942</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer	Occupation	
Retired	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Gerald J Kaiser</b>		Date of Receipt
Mailing Address PO Box 266		<input type="text" value="06"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City	State	Zip Code
Two Rivers	WI	54241-0266
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.79826</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
Manitowoc Co	Director of Sales	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1350.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 122  
(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. G Frederick Kasten Jr**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 160 Logger Head Point  
 City Vero Beach State FL Zip Code 32963-4405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 07 / 2012  
**Transaction ID : SA11AI.78108**  
 Amount of Each Receipt this Period  
 10000.00

**B. Linda Kendall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 Club House Road  
 City Key Largo State FL Zip Code 33037-3600  
 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 ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 04 / 2012  
**Transaction ID : SA11AI.77274**  
 Amount of Each Receipt this Period  
 1000.00

**C. James R Kieckhefer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 569 Rosedale Drive  
 City Thiensville State WI Zip Code 53092-1357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Kohler Company Occupation Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 26 / 2012  
**Transaction ID : SA11AI.81494**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 11100.00  
**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 122  
(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. Jerrald W Kindschi**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address S8931 US Highway 12  
 City State Zip Code  
 Prairie Du Sac WI 53578-9723  
 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  
 06 / 18 / 2012  
**Transaction ID : SA11AI.79339**  
 Amount of Each Receipt this Period  
 100.00

**B. Richard Kindschi**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 249  
 City State Zip Code  
 Mazomanie WI 53560-0249  
 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 ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 20 / 2012  
**Transaction ID : SA11AI.80043**  
 Amount of Each Receipt this Period  
 150.00

**C. Frank E Kos**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7502 West Tuckaway Pines Circle  
 City State Zip Code  
 Franklin WI 53132-8178  
 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 ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 19 / 2012  
**Transaction ID : SA11AI.79534**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 350.00  
**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 17 OF 122
	<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. Paul Kosterman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1775 - 18th Avenue  
 City Hammond State WI Zip Code 54015-5403  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Us Army Occupation Professional Engineer  
 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  
 06 / 04 / 2012  
**Transaction ID : SA11AI.77156**  
 Amount of Each Receipt this Period  
 250.00

**B. Dallas L Krapf**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 407 Jacobs Court  
 City Exton State PA Zip Code 19341-2343  
 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  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 07 / 2012  
**Transaction ID : SA11AI.78215**  
 Amount of Each Receipt this Period  
 500.00

**C. Keith J. Kreps**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 122 East Gilman Street, Apt LL  
 City Madison State WI Zip Code 53703-1455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pro-Techs Dealer Services, LLC Occupation Owner  
 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  
 06 / 07 / 2012  
**Transaction ID : SA11AI.78053**  
 Amount of Each Receipt this Period  
 250.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 122  
(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. Ruth B Larsen**

Mailing Address 105 Gillette Street, Apt 7

City Pardeeville State WI Zip Code 53954-9372

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 ▼  
205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 04 / 2012  
**Transaction ID : SA11Al.77110**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 13510 Braemar Drive

City Elm Grove State WI Zip Code 53122-2509

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

Name of Employer Occupation  
Med College of WI Physician

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 06 / 2012  
**Transaction ID : SA11Al.77966**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. David W Light III**

Mailing Address 301 Mayerling Drive

City Houston State TX Zip Code 77024-6417

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  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 04 / 2012  
**Transaction ID : SA11Al.77705**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00

**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 122  
(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. David W Light III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 301 Mayerling Drive  
 City Houston State TX Zip Code 77024-6417  
 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 ▼ 1350.00

Date of Receipt 06 / 28 / 2012  
**Transaction ID : SA11AI.81806**  
 Amount of Each Receipt this Period 1000.00

**B. Allan W. Lund**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15025 West Beckwith Road  
 City Hayward State WI Zip Code 54843-2004  
 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 06 / 07 / 2012  
**Transaction ID : SA11AI.78102**  
 Amount of Each Receipt this Period 500.00

**C. John R Marshall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2127 Laura Court  
 City Waukesha State WI Zip Code 53186-2849  
 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 06 / 18 / 2012  
**Transaction ID : SA11AI.79118**  
 Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1700.00  
**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 122
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF WISCONSIN**

**A. Suzanne M McDonald**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 580 Harmon Street  
 City Birmingham State MI Zip Code 48009-3820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Homemaker Occupation Homemaker  
 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  
 06 / 19 / 2012  
**Transaction ID : SA11AI.79733**  
 Amount of Each Receipt this Period  
 300.00

**B. Douglas J Morris**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2349 Caribou Lane  
 City Grafton State WI Zip Code 53024-9356  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Coupling Application Engineer  
 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  
 06 / 26 / 2012  
**Transaction ID : SA11AI.81309**  
 Amount of Each Receipt this Period  
 250.00

**C. David E Mullins**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 340 Hidden Creek Circle  
 City Spartanburg State SC Zip Code 29306-6672  
 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 M / D D D / Y Y Y Y Y Y  
 06 / 01 / 2012  
**Transaction ID : SA11AI.76598**  
 Amount of Each Receipt this Period  
 250.00

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

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

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

FOR LINE NUMBER: PAGE 21 OF 122  
(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. Winfield W Piper**

Mailing Address 402 Prospect Avenue

City State Zip Code  
Downingtown PA 19335-2835

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  
 06 / 04 / 2012  
**Transaction ID : SA11AI.77347**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 417 East 29th Street, PO Box 369

City State Zip Code  
Marshfield WI 54449-0369

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

Name of Employer Occupation  
Paret Equity Company Owner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 07 / 2012  
**Transaction ID : SA11AI.78203**

Amount of Each Receipt this Period  
75.00

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

Mailing Address 2010 Ports O Call Street

City State Zip Code  
Granbury TX 76048-6176

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

Name of Employer Occupation  
Self Employed Artist

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  
 06 / 04 / 2012  
**Transaction ID : SA11AI.77588**

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 625.00

**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 22 OF 122
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF WISCONSIN**

**A. Lynda J Robinson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2010 Ports O Call Street  
 City Granbury State TX Zip Code 76048-6176  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Employed Occupation Artist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 29 / 2012  
**Transaction ID : SA11AI.81851**  
 Amount of Each Receipt this Period  
 125.00

**B. Bonnie P Rogers-Briggs**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2724 Egypt Mountain Road  
 City Kittrell State NC Zip Code 27544-9652  
 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 ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 29 / 2012  
**Transaction ID : SA11AI.81963**  
 Amount of Each Receipt this Period  
 200.00

**C. Christopher Schroeder**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2833 Bluse Spruce Dr  
 City Green Bay State WI Zip Code 54311-4508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer JSA Occupation CFO/VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 27 / 2012  
**Transaction ID : SA11AI.81519**  
 Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	825.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 23 OF 122  
(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. Mr. John M Silseth**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15815 Choctaw Trail  
 City Brookfield State WI Zip Code 53005-5596  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Antietam LLC Occupation Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 18 / 2012  
**Transaction ID : SA11AI.79106**  
 Amount of Each Receipt this Period  
 500.00

**B. Jerry W Simmons**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2210 Spoonwood Lane  
 City Florissant State MO Zip Code 63033-1741  
 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 M / D D D / Y Y Y Y Y Y  
 06 / 04 / 2012  
**Transaction ID : SA11AI.77118**  
 Amount of Each Receipt this Period  
 250.00

**c. Stanley Strelka**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12366 N. River Road  
 City Mequon State WI Zip Code 53092-2222  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pro Ins Services Occupation Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 07 / 2012  
**Transaction ID : SA11AI.78403**  
 Amount of Each Receipt this Period  
 250.00

**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 24 OF 122  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF WISCONSIN**

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

Mailing Address 213 Crystal Lane

City Madison	State WI	Zip Code 53714-2506
-----------------	-------------	------------------------

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  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 18 / 2012  
**Transaction ID : SA11AI.79001**

Amount of Each Receipt this Period  
75.00

Full Name (Last, First, Middle Initial)  
**B. David Vogel Uihlein Jr**

Mailing Address 322 East Michigan Street, #400

City Milwaukee	State WI	Zip Code 53202-5005
-------------------	-------------	------------------------

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

Name of Employer Uihlein/Wilson Architects	Occupation Architect
---	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 25 / 2012  
**Transaction ID : SA11AI.81176**

Amount of Each Receipt this Period  
7500.00

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

Mailing Address 101 Newberry Lane

City Howell	State MI	Zip Code 48843-9567
----------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 25 / 2012  
**Transaction ID : SA11AI.80922**

Amount of Each Receipt this Period  
125.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

FOR LINE NUMBER: PAGE 25 OF 122  
(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. Mr. Bernard Van Dinter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8081 Fielding Ln  
 City Greendale State WI Zip Code 53129-2115  
 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 ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 19 / 2012  
**Transaction ID : SA11AI.79728**  
 Amount of Each Receipt this Period  
 200.00

**B. Freddie K Wheeler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 931 Oxford Drive  
 City Los Altos State CA Zip Code 94024-7033  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Merz Aesthetics Inc. Occupation Attorney  
 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  
 06 / 22 / 2012  
**Transaction ID : SA11AI.80526**  
 Amount of Each Receipt this Period  
 300.00

**C. Barbara H Wilson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2540 Green Street  
 City San Francisco State CA Zip Code 94123-4629  
 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 M / D D D / Y Y Y Y Y Y  
 06 / 22 / 2012  
**Transaction ID : SA11AI.80421**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 800.00  
**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 122
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF WISCONSIN**

**A.** Full Name (Last, First, Middle Initial)  
**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 SC	Occupation Surgeon
---	-----------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2012

**Transaction ID : SA11AI.78770**

Amount of Each Receipt this Period  
500.00

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	34180.00

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

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

FOR LINE NUMBER: PAGE 27 OF 122  
(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. DUFFY FOR CONGRESS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 538  
 City WAUSAU State WI Zip Code 54402  
 FEC ID number of contributing federal political committee. **C** C00464339  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2383.03

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2012  
**Transaction ID : SA11C.82174**  
 Amount of Each Receipt this Period  
 475.21  
 In-kind - office rent/utilities

**B. NATIONAL REPUBLICAN SENATORIAL COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 425 SECOND STREET NE  
 City WASHINGTON State DC Zip Code 20002  
 FEC ID number of contributing federal political committee. **C** C00027466  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 13 / 2012  
**Transaction ID : SA11C.81979**  
 Amount of Each Receipt this Period  
 2500.00  
 Transfer

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2975.21
<b>TOTAL</b> This Period (last page this line number only).....▶	2975.21

**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 28 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF WISCONSIN**

**A. REPUBLICAN NATIONAL COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 310 FIRST STREET SE  
 City WASHINGTON State DC Zip Code 20003  
 FEC ID number of contributing federal political committee. **C** C00003418  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 716158.55

Date of Receipt 06 / 21 / 2012  
**Transaction ID : SA12.82198**  
 Amount of Each Receipt this Period 1158.55  
 In-kind - equipment transfer

**B. REPUBLICAN NATIONAL COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 310 FIRST STREET SE  
 City WASHINGTON State DC Zip Code 20003  
 FEC ID number of contributing federal political committee. **C** C00003418  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 717618.54

Date of Receipt 06 / 22 / 2012  
**Transaction ID : SA12.82176**  
 Amount of Each Receipt this Period 1459.99  
 In-kind - equipment transfer

**C. REPUBLICAN NATIONAL COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 310 FIRST STREET SE  
 City WASHINGTON State DC Zip Code 20003  
 FEC ID number of contributing federal political committee. **C** C00003418  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 720273.54

Date of Receipt 06 / 22 / 2012  
**Transaction ID : SA12.82178**  
 Amount of Each Receipt this Period 2655.00  
 In-kind - equipment transfer

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5273.54  
**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 29 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)  
**A. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City State Zip Code  
WASHINGTON DC 20003

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
722928.54

Date of Receipt  
MM / DD / YYYY  
06 / 22 / 2012  
**Transaction ID : SA12.82180**

Amount of Each Receipt this Period  
2655.00

In-kind - equipment transfer

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

Mailing Address 310 FIRST STREET SE

City State Zip Code  
WASHINGTON DC 20003

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
725643.53

Date of Receipt  
MM / DD / YYYY  
06 / 22 / 2012  
**Transaction ID : SA12.82182**

Amount of Each Receipt this Period  
2714.99

In-kind - equipment transfer

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

Mailing Address 310 FIRST STREET SE

City State Zip Code  
WASHINGTON DC 20003

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
728358.52

Date of Receipt  
MM / DD / YYYY  
06 / 22 / 2012  
**Transaction ID : SA12.82184**

Amount of Each Receipt this Period  
2714.99

In-kind - equipment transfer

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8084.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)  
**A. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
731073.51

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2012  
**Transaction ID : SA12.82186**

Amount of Each Receipt this Period  
 2714.99

In-kind - equipment transfer

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

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
732473.51

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2012  
**Transaction ID : SA12.82188**

Amount of Each Receipt this Period  
 1400.00

In-kind - equipment transfer

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

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
733873.51

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2012  
**Transaction ID : SA12.82190**

Amount of Each Receipt this Period  
 1400.00

In-kind - equipment transfer

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5514.99
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF WISCONSIN**

**A. REPUBLICAN NATIONAL COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 310 FIRST STREET SE  
 City WASHINGTON State DC Zip Code 20003  
 FEC ID number of contributing federal political committee. **C** C00003418  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 736528.51

Date of Receipt 06 / 22 / 2012  
**Transaction ID : SA12.82192**  
 Amount of Each Receipt this Period 2655.00  
 In-kind - equipment transfer

**B. REPUBLICAN NATIONAL COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 310 FIRST STREET SE  
 City WASHINGTON State DC Zip Code 20003  
 FEC ID number of contributing federal political committee. **C** C00003418  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 737928.51

Date of Receipt 06 / 22 / 2012  
**Transaction ID : SA12.82194**  
 Amount of Each Receipt this Period 1400.00  
 In-kind - equipment transfer

**C. REPUBLICAN NATIONAL COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 310 FIRST STREET SE  
 City WASHINGTON State DC Zip Code 20003  
 FEC ID number of contributing federal political committee. **C** C00003418  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 740583.51

Date of Receipt 06 / 22 / 2012  
**Transaction ID : SA12.82196**  
 Amount of Each Receipt this Period 2655.00  
 In-kind - equipment transfer

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6710.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 32 OF 122  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF WISCONSIN**

**A. REPUBLICAN NATIONAL COMMITTEE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 310 FIRST STREET SE  
City WASHINGTON State DC Zip Code 20003  
FEC ID number of contributing federal political committee. **C** C00003418  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
741983.51

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 27 / 2012  
**Transaction ID : SA12.82200**  
Amount of Each Receipt this Period  
1400.00  
In-kind - equipment transfer

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	26983.51



**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 33 OF 122
<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**

**A. Ms. Diane K Ambroziak**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1715 Maple Dale Road  
 City West Bend State WI Zip Code 53090-8965  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer rytec corporation Occupation Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2012  
**Transaction ID : SA15.82169**  
 Amount of Each Receipt this Period  
 650.00  
 National Convention Expense Reimbursement

**B. Candee Arndt**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2370 Woodmoor Lane  
 City Brookfield State WI Zip Code 53045-4259  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Housewife Occupation Housewife  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2012  
**Transaction ID : SA15.82167**  
 Amount of Each Receipt this Period  
 650.00  
 National Convention Expense Reimbursement

**C. Rick Baas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 156 North 60th Street  
 City Milwaukee State WI Zip Code 53213-4218  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GOAL Realty Occupation Realtor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2012  
**Transaction ID : SA15.82049**  
 Amount of Each Receipt this Period  
 1300.00  
 National Convention Expense Reimbursement

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 OF 122
<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**

**A. Mr. Kevin M Barthel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 67  
 City Lakewood State WI Zip Code 54138-0067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Millennium Challenge Corporation Occupation Geographer - Land Tenure Specialist  
 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  
 06 / 18 / 2012  
**Transaction ID : SA15.82163**  
 Amount of Each Receipt this Period  
 650.00  
 National Convention Expense Reimbursement

**B. David Beightol**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 M Street Southeast Suite 500  
 City Washington State DC Zip Code 20003-3519  
 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  
 06 / 29 / 2012  
**Transaction ID : SA15.82161**  
 Amount of Each Receipt this Period  
 650.00  
 National Convention Expense Reimbursement

**c. Crystal A Berg**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1962 Robins Run Road  
 City Hartford State WI Zip Code 53027  
 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 ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 04 / 2012  
**Transaction ID : SA15.82158**  
 Amount of Each Receipt this Period  
 650.00  
 National Convention Expense Reimbursement

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 OF 122
<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**

**A. Rohn W Bishop**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 200 Brandon Street  
 City Waupun State WI Zip Code 53963-1304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Homan Auto Occupation Detail  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt 06 / 25 / 2012  
**Transaction ID : SA15.82156**  
 Amount of Each Receipt this Period 650.00  
 National Convention Expense Reimbursement

**B. Thomas Buestrin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 120 Bishops Way Suite 111  
 City Brookfield State WI Zip Code 53005-6214  
 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 06 / 08 / 2012  
**Transaction ID : SA15.82047**  
 Amount of Each Receipt this Period 1300.00  
 National Convention Expense Reimbursement

**C. Judith M Couri**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1215 Seitz Drive  
 City Waukesha State WI Zip Code 53186-6745  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Couri Insurance Agency Occupation Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt 06 / 12 / 2012  
**Transaction ID : SA15.82045**  
 Amount of Each Receipt this Period 1300.00  
 National Convention Expense Reimbursement

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 36 OF 122
<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) <b>A. Brad Courtney</b>		Date of Receipt
Mailing Address 4600 N Wilshire Road		<input type="text" value="06"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City State Zip Code Whitefish Bay WI 53211		<b>Transaction ID : SA15.82018</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="1950.00"/>
Name of Employer Occupation The Courtney Co. Sales Rep		National Convention Expense Reimbursement
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/>

Full Name (Last, First, Middle Initial) <b>B. Michael P Czysch</b>		Date of Receipt
Mailing Address W3964 Dekker Road		<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City State Zip Code Waldo WI 53093-1703		<b>Transaction ID : SA15.82153</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="650.00"/>
Name of Employer Occupation Dekker Hillbilly Produce Self Employed Fruit Grower		National Convention Expense Reimbursement
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="25.00"/>

Full Name (Last, First, Middle Initial) <b>C. John R Danneker</b>		Date of Receipt
Mailing Address N478 - 244th Street, PO Box 38		<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>
City State Zip Code Maiden Rock WI 54750-0038		<b>Transaction ID : SA15.82043</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="1300.00"/>
Name of Employer Occupation The Window Technicians, Inc. Owner		National Convention Expense Reimbursement
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="3900.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 37 OF 122
<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**

**A. Grace D Degner**  
Full Name (Last, First, Middle Initial)

Mailing Address 756 Spruce Street

City Hustisford State WI Zip Code 53034-9728

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

Name of Employer None Occupation Self Employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 07 / 2012

**Transaction ID : SA15.82152**

Amount of Each Receipt this Period  
 650.00

National Convention Expense Reimbursement

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

Mailing Address 5121 Russell Court West

City Greendale State WI Zip Code 53129-2839

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

Name of Employer Superior Financial Occupation Financial Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2012

**Transaction ID : SA15.82149**

Amount of Each Receipt this Period  
 650.00

National Convention Expense Reimbursement

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

Mailing Address 5121 Russell Court West

City Greendale State WI Zip Code 53129-2839

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

Name of Employer Retired Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2012

**Transaction ID : SA15.82148**

Amount of Each Receipt this Period  
 650.00

National Convention Expense Reimbursement

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 38 OF 122
<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**

**A. Mr. Terence Dittrich**  
Full Name (Last, First, Middle Initial)

Mailing Address 803 North Ponderosa Drive

City Hartland State WI Zip Code 53029-8638

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

Name of Employer Spancrete Occupation Sales Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2012  
**Transaction ID : SA15.82146**

Amount of Each Receipt this Period  
 650.00

National Convention Expense Reimbursement

**B. Patty Doughty-Shabaz**  
Full Name (Last, First, Middle Initial)

Mailing Address 1501 Burning Wood Way

City Madison State WI Zip Code 53704-1000

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

Name of Employer Self Occupation Housewife

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2012  
**Transaction ID : SA15.82144**

Amount of Each Receipt this Period  
 650.00

National Convention Expense Reimbursement

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

Mailing Address 8205 N River Road

City Milwaukee State WI Zip Code 53217-2546

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

Name of Employer Capital Midwest Fund Occupation Banking and Finance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 18 / 2012  
**Transaction ID : SA15.82140**

Amount of Each Receipt this Period  
 650.00

National Convention Expense Reimbursement

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 39 OF 122
<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**

**A. Stephen Einhorn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8205 N River Road  
 City Milwaukee State WI Zip Code 53217-2546  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Einhorn Associates Inc. Occupation President  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date

Date of Receipt  
 06 / 18 / 2012  
**Transaction ID : SA15.82141**  
 Amount of Each Receipt this Period  
 650.00  
 National Convention Expense Reimbursement

**B. Jere C Fabick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address W354 N5191 River Road  
 City Oconomowoc State WI Zip Code 53066  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Fabco Equipment Occupation Executive  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 10000.00

Date of Receipt  
 06 / 07 / 2012  
**Transaction ID : SA15.82138**  
 Amount of Each Receipt this Period  
 650.00  
 National Convention Expense Reimbursement

**C. Renee C Fabick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address W354 N5191 River Rd  
 City Oconomowoc State WI Zip Code 53066-3338  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Fabco Equipment Occupation Training Mgr  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 10000.00

Date of Receipt  
 06 / 15 / 2012  
**Transaction ID : SA15.82136**  
 Amount of Each Receipt this Period  
 650.00  
 National Convention Expense Reimbursement

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1950.00  
**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 40 OF 122
<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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF WISCONSIN**

**A. Daniel J Feyen**  
Full Name (Last, First, Middle Initial)

Mailing Address 962 Churchill Lane

City State Zip Code  
Fond Du Lac WI 54935-6396

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
ED Direct Printing Production Manager

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  
06 / 20 / 2012

**Transaction ID : SA15.82040**

Amount of Each Receipt this Period

National Convention Expense Reimbursement

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

Mailing Address N171W20471 Valley Drive

City State Zip Code  
Jackson WI 53037-9450

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Sbc Senior Technical Director

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  
06 / 04 / 2012

**Transaction ID : SA15.82134**

Amount of Each Receipt this Period

National Convention Expense Reimbursement

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

Mailing Address 6719 Locksley Ln

City State Zip Code  
Cedarburg WI 53012-9791

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Inconsulting Llc Partner

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  
06 / 20 / 2012

**Transaction ID : SA15.82131**

Amount of Each Receipt this Period

National Convention Expense Reimbursement

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="2600.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>



**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 41 OF 122
<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 checked="" 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) <b>A. Walter Frohboese</b>		Date of Receipt MM / DD / YYYY 06 / 20 / 2012 <b>Transaction ID : SA15.82130</b>
Mailing Address 6719 Locksley Lane		Amount of Each Receipt this Period 650.00 National Convention Expense Reimbursement
City Cedarburg	State WI	Zip Code 53012-9791
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INConsulting LLC	Occupation Self Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>B. Mr. Jim Geldreich</b>		Date of Receipt MM / DD / YYYY 06 / 18 / 2012 <b>Transaction ID : SA15.82128</b>
Mailing Address 3209 Old Hickory Place		Amount of Each Receipt this Period 650.00 National Convention Expense Reimbursement
City West Bend	State WI	Zip Code 53095-8315
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Country Financial	Occupation Claims Adj	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>C. Jenna Golem</b>		Date of Receipt MM / DD / YYYY 06 / 21 / 2012 <b>Transaction ID : SA15.82126</b>
Mailing Address S190 I AH May Tah Road		Amount of Each Receipt this Period 650.00 National Convention Expense Reimbursement
City Oshkosh	State WI	Zip Code 54901
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Orange House Creative, LLC	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 42 OF 122
<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**

**A. Michael W Grebe**  
Full Name (Last, First, Middle Initial)

Mailing Address 777 North Prospect Avenue, Apt 402

City Milwaukee	State WI	Zip Code 53202-4003
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FEC ID number of contributing federal political committee. **C**

Name of Employer Bradley Foundation	Occupation CEO
--	-------------------

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
06	/	07	/	2012

**Transaction ID : SA15.82124**

Amount of Each Receipt this Period  
650.00

National Convention Expense Reimbursement

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

Mailing Address 717 W First Street

City Shawano	State WI	Zip Code 54166-1909
-----------------	-------------	------------------------

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

Name of Employer Concordia Seminary	Occupation Reverend Seminarian
--	-----------------------------------

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
06	/	19	/	2012

**Transaction ID : SA15.82122**

Amount of Each Receipt this Period  
650.00

National Convention Expense Reimbursement

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

Mailing Address S9081 MeadowDale Road

City Prairie Du Sac	State WI	Zip Code 53578-9707
------------------------	-------------	------------------------

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
06	/	25	/	2012

**Transaction ID : SA15.82119**

Amount of Each Receipt this Period  
650.00

National Convention Expense Reimbursement

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 43 OF 122
<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**

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

Mailing Address 1141 173rd Ave

City New Richmond	State WI	Zip Code 54017-6329
----------------------	-------------	------------------------

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

Name of Employer Bear Buddies Child Development Center	Occupation Administrator
---	-----------------------------

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
06		25		2012

**Transaction ID : SA15.82118**

Amount of Each Receipt this Period  

650.00
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National Convention Expense Reimbursement

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

Mailing Address 25 East Superior, Apt 3905

City Chicago	State IL	Zip Code 60611-2599
-----------------	-------------	------------------------

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

Name of Employer Rush Medical Center	Occupation Pediatric Nurse
---	-------------------------------

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
06		20		2012

**Transaction ID : SA15.82116**

Amount of Each Receipt this Period  

650.00
--------

National Convention Expense Reimbursement

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

Mailing Address 2810 Wentworth Drive

City Madison	State WI	Zip Code 53719-3418
-----------------	-------------	------------------------

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

Name of Employer Conney Safety Products	Occupation Marketing Manager
--	---------------------------------

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
06		19		2012

**Transaction ID : SA15.82114**

Amount of Each Receipt this Period  

650.00
--------

National Convention Expense Reimbursement

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 44 OF 122
<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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF WISCONSIN**

**A. William E Johnson**  
Full Name (Last, First, Middle Initial)

Mailing Address W147 East River Road

City State Zip Code  
Hayward WI 54843-7816

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  
 06 / 21 / 2012

**Transaction ID : SA15.82038**

Amount of Each Receipt this Period  
 1300.00

National Convention Expense Reimbursement

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

Mailing Address W4792 Highway F

City State Zip Code  
Waldo WI 53093

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  
 06 / 29 / 2012

**Transaction ID : SA15.82110**

Amount of Each Receipt this Period  
 650.00

National Convention Expense Reimbursement

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

Mailing Address 619 Main Street

City State Zip Code  
Delafield WI 53018-1505

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

Name of Employer Occupation  
Miller Coors VP Corporate Affairs

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  
 06 / 14 / 2012

**Transaction ID : SA15.82109**

Amount of Each Receipt this Period  
 650.00

National Convention Expense Reimbursement

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 45 OF 122  
(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. David A Karst**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11961 West Whitaker Avenue  
 City Greenfield State WI Zip Code 53228-2472  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Boyseasons Occupation Vp Hr  
 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  
 06 / 25 / 2012  
**Transaction ID : SA15.82106**  
 Amount of Each Receipt this Period  
 650.00  
 National Convention Expense Reimbursement

**B. Lonnie E Kennell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15914 Radio Hill Road  
 City Hayward State WI Zip Code 54843-6588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Kennel Electric Inc. Occupation Owner  
 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  
 06 / 19 / 2012  
**Transaction ID : SA15.82105**  
 Amount of Each Receipt this Period  
 650.00  
 National Convention Expense Reimbursement

**C. Kathleen A Kiernan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1751 Scenic Road  
 City Richfield State WI Zip Code 53076-9604  
 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 ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 04 / 2012  
**Transaction ID : SA15.82103**  
 Amount of Each Receipt this Period  
 650.00  
 National Convention Expense Reimbursement

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1950.00  
**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 46 OF 122
<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**

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

Mailing Address 3508 North Edgewood Drive

City Janesville State WI Zip Code 53545-9547

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

Name of Employer King Capital, LLC Occupation Investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt 06 / 27 / 2012  
Transaction ID : SA15.82036

Amount of Each Receipt this Period 1300.00

National Convention Expense Reimbursement

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

Mailing Address 274 Ridge Road

City Oconto Falls State WI Zip Code 54154-1259

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

Name of Employer INNOGISTICS LLC Occupation TRUCK DRIVER- CDL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5.00

Date of Receipt 06 / 25 / 2012  
Transaction ID : SA15.82101

Amount of Each Receipt this Period 650.00

National Convention Expense Reimbursement

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

Mailing Address 4311 Winneauh

City Monona State WI Zip Code 53716-1054

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 06 / 21 / 2012  
Transaction ID : SA15.82099

Amount of Each Receipt this Period 650.00

National Convention Expense Reimbursement

**SUBTOTAL** of Receipts This Page (optional).....▶ 2600.00

**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 47 OF 122
<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**

**A. Maripat Krueger**  
Full Name (Last, First, Middle Initial)  
Mailing Address E4517 473rd Avenue

City Menomonie	State WI	Zip Code 54751-5474
-------------------	-------------	------------------------

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

Name of Employer Self	Occupation Homemaker
--------------------------	-------------------------

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
06	/	04	/	2012

**Transaction ID : SA15.82030**

Amount of Each Receipt this Period  

1300.00
---------

National Convention Expense Reimbursement

**B. Carl W Kuehne**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4479 Heritage Heights Road

City De Pere	State WI	Zip Code 54115
-----------------	-------------	-------------------

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

Name of Employer American Food Groups	Occupation CEO
--	-------------------

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
06	/	25	/	2012

**Transaction ID : SA15.82028**

Amount of Each Receipt this Period  

1300.00
---------

National Convention Expense Reimbursement

**C. Timothy J Lakin**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7 Auroura Lane

City Fond Du Lac	State WI	Zip Code 54935-2842
---------------------	-------------	------------------------

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
06	/	25	/	2012

**Transaction ID : SA15.82096**

Amount of Each Receipt this Period  

650.00
--------

National Convention Expense Reimbursement

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 48 OF 122
<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**

**A. Andrea Lombard**  
Full Name (Last, First, Middle Initial)  
Mailing Address 509 2nd Avenue

City Baraboo	State WI	Zip Code 53913-2463
-----------------	-------------	------------------------

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 ▼  
80.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2012

**Transaction ID : SA15.82094**

Amount of Each Receipt this Period  
650.00

National Convention Expense Reimbursement

**B. Kirsten E Lombard**  
Full Name (Last, First, Middle Initial)  
Mailing Address 210 North Pateson Street, Apt 2

City Madison	State WI	Zip Code 53703-2325
-----------------	-------------	------------------------

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

Name of Employer CDW Corporation	Occupation Communications Specialist
-------------------------------------	---

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
06	/	20	/	2012

**Transaction ID : SA15.82092**

Amount of Each Receipt this Period  
650.00

National Convention Expense Reimbursement

**C. Susan c Lynch**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2042 Grandview Blvd

City Onalaska	State WI	Zip Code 54650-8741
------------------	-------------	------------------------

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

Name of Employer National Federation of Republican Wome	Occupation President
--	-------------------------

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
06	/	19	/	2012

**Transaction ID : SA15.82090**

Amount of Each Receipt this Period  
650.00

National Convention Expense Reimbursement

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 49 OF 122
<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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF WISCONSIN**

**A. John P Macy**  
Full Name (Last, First, Middle Initial)

Mailing Address 720 North East Avenue

City Waukesha State WI Zip Code 53186-4800

FEC ID number of contributing federal political committee.

Name of Employer Arenz, Molter, Macy and Riffle Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /   
**Transaction ID : SA15.82026**

Amount of Each Receipt this Period  
  
 National Convention Expense Reimbursement

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

Mailing Address 15611 West Lakewood Drive

City Hayward State WI Zip Code 54843

FEC ID number of contributing federal political committee.

Name of Employer Miller Hospitality Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /   
**Transaction ID : SA15.82088**

Amount of Each Receipt this Period  
  
 National Convention Expense Reimbursement

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

Mailing Address N4771 Glanders Road

City Black River Falls State WI Zip Code 54615-5223

FEC ID number of contributing federal political committee.

Name of Employer Self-employed Occupation Business Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /   
**Transaction ID : SA15.82086**

Amount of Each Receipt this Period  
  
 National Convention Expense Reimbursement

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="2600.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 50 OF 122
<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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF WISCONSIN**

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

Mailing Address 16175 Elder Lawn Parkway

City Delafield	State WI	Zip Code 53018
-------------------	-------------	-------------------

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

Name of Employer Symantec	Occupation Sales
------------------------------	---------------------

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
06	/	25	/	2012

**Transaction ID : SA15.82084**

Amount of Each Receipt this Period  

650.00
--------

National Convention Expense Reimbursement

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

Mailing Address 576 Chapel Hill Court

City Wales	State WI	Zip Code 53183-9520
---------------	-------------	------------------------

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

Name of Employer Republican Party of Waukesha Co.	Occupation Assistant
--	-------------------------

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
06	/	11	/	2012

**Transaction ID : SA15.82082**

Amount of Each Receipt this Period  

650.00
--------

National Convention Expense Reimbursement

**C. Ms. Lillian M Nolan**  
Full Name (Last, First, Middle Initial)

Mailing Address 78 Martin Place

City Fond Du Lac	State WI	Zip Code 54935-6203
---------------------	-------------	------------------------

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 ▼ 50.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2012

**Transaction ID : SA15.82079**

Amount of Each Receipt this Period  

650.00
--------

National Convention Expense Reimbursement

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 51 OF 122
<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 checked="" 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. People for Rebecca**

Mailing Address PO Box 13393

City Wauwatosa State WI Zip Code 53213

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  
 06 / 25 / 2012  
**Transaction ID : SA15.82034**

Amount of Each Receipt this Period  
 1300.00

National Convention Expense Reimbursement

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

Mailing Address 1105 Highland Parkway Blvd

City Wausau State WI Zip Code 54403-5072

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  
 06 / 18 / 2012  
**Transaction ID : SA15.82077**

Amount of Each Receipt this Period  
 650.00

National Convention Expense Reimbursement

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

Mailing Address 121 East Brown Street

City Milwaukee State WI Zip Code 53212-3710

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

Name of Employer Occupation  
 Private Industry Council Administrator

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  
 06 / 25 / 2012  
**Transaction ID : SA15.82075**

Amount of Each Receipt this Period  
 650.00

National Convention Expense Reimbursement

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 52 OF 122
<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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF WISCONSIN**

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

Mailing Address N110W16906 Ashbury Lane

City Milwaukee State WI Zip Code 53202

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  
 06 / 18 / 2012

**Transaction ID : SA15.82073**

Amount of Each Receipt this Period  
 650.00

National Convention Expense Reimbursement

**B. RON JOHNSON FOR SENATE INC**  
Full Name (Last, First, Middle Initial)

Mailing Address 219 E WASHINGTON AVE  
SUITE 101

City OSHKOSH State WI Zip Code 54901

FEC ID number of contributing federal political committee. **C** C00482984

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  
 06 / 28 / 2012

**Transaction ID : SA15.82016**

Amount of Each Receipt this Period  
 2600.00

National Convention Expense Reimbursement

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

Mailing Address 2333 St. Alberts Drive

City Sun Prairie State WI Zip Code 53590-3715

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  
 06 / 27 / 2012

**Transaction ID : SA15.82071**

Amount of Each Receipt this Period  
 650.00

National Convention Expense Reimbursement

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 53 OF 122
<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**

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

Mailing Address 10621 West Blue Mounds road

City Blue Mounds State WI Zip Code 53517-9642

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  
 06 / 26 / 2012

**Transaction ID : SA15.82069**

Amount of Each Receipt this Period  
 650.00

National Convention Expense Reimbursement

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

Mailing Address 1950 West Dean Road

City Milwaukee State WI Zip Code 53217-2003

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 ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 27 / 2012

**Transaction ID : SA15.82067**

Amount of Each Receipt this Period  
 650.00

National Convention Expense Reimbursement

**c. Mr. John S Shiely**  
Full Name (Last, First, Middle Initial)

Mailing Address 15270 Briaridge Court

City Elm Grove State WI Zip Code 53122-2003

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

Name of Employer Occupation  
 Briggs and Stratton Corp Executive

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  
 06 / 11 / 2012

**Transaction ID : SA15.82065**

Amount of Each Receipt this Period  
 650.00

National Convention Expense Reimbursement

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 54 OF 122
<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**

**A. Richard P Skorupan**  
Full Name (Last, First, Middle Initial)

Mailing Address 1810 Thorstrand Road

City Madison State WI Zip Code 53705-1044

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  
 06 / 25 / 2012

**Transaction ID : SA15.82024**

Amount of Each Receipt this Period  
 1300.00

National Convention Expense Reimbursement

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

Mailing Address 2125 West Woodside Lane

City Mequon State WI Zip Code 53092-2944

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

Name of Employer Occupation  
 Self Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2012

**Transaction ID : SA15.82063**

Amount of Each Receipt this Period  
 650.00

National Convention Expense Reimbursement

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

Mailing Address 1626 North Prospect Avenue

City Milwaukee State WI Zip Code 53202-6732

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

Name of Employer Occupation  
 Prospect Realty Broker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 18 / 2012

**Transaction ID : SA15.82022**

Amount of Each Receipt this Period  
 1300.00

National Convention Expense Reimbursement

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 55 OF 122
<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**

**A. Mrs. Marilyn Stauter**  
Full Name (Last, First, Middle Initial)

Mailing Address 3837 Monona Dr Apt 3

City Monona State WI Zip Code 53714-2877

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

Name of Employer Stark Co. Realtors Occupation Realtor

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  
 06 / 08 / 2012

**Transaction ID : SA15.82061**

Amount of Each Receipt this Period  
 650.00

National Convention Expense Reimbursement

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

Mailing Address 3837 Monona Drive #3

City Monona State WI Zip Code 53714-2877

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

Name of Employer Stark Company Occupation Realtor

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  
 06 / 08 / 2012

**Transaction ID : SA15.82059**

Amount of Each Receipt this Period  
 650.00

National Convention Expense Reimbursement

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

Mailing Address 2117 Savanna Drive

City Janesville State WI Zip Code 53546-1152

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

Name of Employer Regal Beloit Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 25 / 2012

**Transaction ID : SA15.82055**

Amount of Each Receipt this Period  
 650.00

National Convention Expense Reimbursement

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 56 OF 122
<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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF WISCONSIN**

**A. Mr. George Steil**  
Full Name (Last, First, Middle Initial)  
Mailing Address 728 Thornecrest Ct  
City Janesville State WI Zip Code 53546-2055  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Brennan-steil Law Firm Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
06 / 25 / 2012  
**Transaction ID : SA15.82056**  
Amount of Each Receipt this Period  
650.00  
National Convention Expense Reimbursement

**B. Jonathan R Steitz**  
Full Name (Last, First, Middle Initial)  
Mailing Address 12262 - 38th Avenue  
City Pleasant Prairie State WI Zip Code 53158  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Robert W. Baird & Co. Occupation Associate  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
06 / 25 / 2012  
**Transaction ID : SA15.82020**  
Amount of Each Receipt this Period  
1300.00  
National Convention Expense Reimbursement

**C. Tommy G Thompson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1313 Manassas Trail  
City Madison State WI Zip Code 53718-8243  
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 ▼

Date of Receipt  
06 / 22 / 2012  
**Transaction ID : SA15.82032**  
Amount of Each Receipt this Period  
1300.00  
National Convention Expense Reimbursement

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 57 OF 122
<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**

**A. U S Post Office**  
Full Name (Last, First, Middle Initial)  
Mailing Address 215 Martin Luther King Jr  
City Madison State WI Zip Code 53703  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 3685.23

Date of Receipt  
06 / 12 / 2012  
**Transaction ID : SA15.82012**  
Amount of Each Receipt this Period 1995.50  
Refund

**B. Van Hollen for Attorney General**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 843  
City Madison State WI Zip Code 53701  
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  
06 / 28 / 2012  
**Transaction ID : SA15.82165**  
Amount of Each Receipt this Period 650.00  
National Convention Expense Reimbursement

**C. Yash P Wadhwa**  
Full Name (Last, First, Middle Initial)  
Mailing Address 920 West Brentwood Lane  
City Milwaukee State WI Zip Code 53217-4115  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Strand Associates, Inc. Director of Operations  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
06 / 18 / 2012  
**Transaction ID : SA15.82053**  
Amount of Each Receipt this Period 650.00  
National Convention Expense Reimbursement

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3295.50  
**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 58 OF 122  
(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. Laurie Wolf**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9439 North Lake Drive  
 City Milwaukee State WI Zip Code 53217-1450  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer North Shore Republicans Occupation Chairperson  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 08 / 2012  
**Transaction ID : SA15.82051**  
 Amount of Each Receipt this Period  
 650.00  
 National Convention Expense Reimbursement

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	650.00
<b>TOTAL</b> This Period (last page this line number only).....▶	63745.50

**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. AirTran**

Mailing Address 9955 AirTran Blvd

City Orlando State FL Zip Code 32827

Purpose of Disbursement  
6/25 CC Pmt: staff travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.82385**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. AirTran**

Mailing Address 9955 AirTran Blvd

City Orlando State FL Zip Code 32827

Purpose of Disbursement  
6/25 CC Pmt: staff travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.82399**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. AirTran**

Mailing Address 9955 AirTran Blvd

City Orlando State FL Zip Code 32827

Purpose of Disbursement  
6/25 CC Pmt: travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.82408**

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. AJ Bombers**

Mailing Address 201 West Gorham Street

City Madison State WI Zip Code 53703

Purpose of Disbursement  
6/25 CC Pmt: food

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
06	/	01	/	2012

**Transaction ID : SB21B.82423**

Amount of Each Disbursement this Period

104.97
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. American Express Merchant Services**

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement  
Credit Card Fees

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
06	/	08	/	2012

**Transaction ID : SB21B.82214**

Amount of Each Disbursement this Period

7.95
------

Full Name (Last, First, Middle Initial)

**C. American Express Merchant Services**

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement  
Credit Card Fees

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
06	/	12	/	2012

**Transaction ID : SB21B.82217**

Amount of Each Disbursement this Period

162.10
--------

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

170.05
--------

**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. Annett Bus Lines**

Mailing Address 130 Madrid Dr

City Sebring State FL Zip Code 33876

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 21 / 2012

**Transaction ID : SB21B.82283**

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

**B. Badgerland Chemical & Supply**

Mailing Address PO Box 620303

City Middleton State WI Zip Code 53562

Purpose of Disbursement  
office cleaning supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 15 / 2012

**Transaction ID : SB21B.82222**

Amount of Each Disbursement this Period

254.75

Full Name (Last, First, Middle Initial)

**C. Boston Taxi**

Mailing Address 120 Braintree Street

City Allston State MA Zip Code 02134

Purpose of Disbursement  
6/25 CC Pmt: cab fare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 08 / 2012

**Transaction ID : SB21B.82402**

Amount of Each Disbursement this Period

40.48

**[MEMO ITEM]**

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

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

654.75

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Brocach Irish Pub**

Mailing Address 7 W Main St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
6/25 CC Pmt: food

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	5		1	8		2	0	1	2

Transaction ID : **SB21B.82386**

Amount of Each Disbursement this Period

3	3	.	2	3
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Brocach Irish Pub**

Mailing Address 7 W Main St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
6/25 CC Pmt: food

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	5		3	0		2	0	1	2

Transaction ID : **SB21B.82393**

Amount of Each Disbursement this Period

7	6	.	9	2
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Charter - Madison**

Mailing Address PO Box 2981

City Milwaukee State WI Zip Code 53201-2981

Purpose of Disbursement  
Internet service

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	6		1	5		2	0	1	2

Transaction ID : **SB21B.82226**

Amount of Each Disbursement this Period

1	5	.	6	2
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

1	5	.	6	2
---	---	---	---	---

1	5	.	6	2
---	---	---	---	---

**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. Charter - Madison**

Mailing Address PO Box 2981

City Milwaukee State WI Zip Code 53201-2981

Purpose of Disbursement  
Internet Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 15 / 2012

**Transaction ID : SB21B.82229**

Amount of Each Disbursement this Period

270.03

Full Name (Last, First, Middle Initial)

**B. Charter - Madison**

Mailing Address PO Box 2981

City Milwaukee State WI Zip Code 53201-2981

Purpose of Disbursement  
Internet Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 15 / 2012

**Transaction ID : SB21B.82230**

Amount of Each Disbursement this Period

192.56

Full Name (Last, First, Middle Initial)

**C. Charter Communications**

Mailing Address PO Box 3255

City Milwaukee State WI Zip Code 53201-0000

Purpose of Disbursement  
Internet Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 15 / 2012

**Transaction ID : SB21B.82228**

Amount of Each Disbursement this Period

275.19

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

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

737.78

**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. Chart House**

Mailing Address 60 Long Wharf

City Boston State MA Zip Code 02110

Purpose of Disbursement  
6/25 CC Pmt: food

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	6			0	8			2	0	1	2		

**Transaction ID : SB21B.82406**

Amount of Each Disbursement this Period

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

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. City of Madison Parking**

Mailing Address 215 Martin Luther King Jr #100

City Madison State WI Zip Code 53703

Purpose of Disbursement  
6/25 CC Pmt: parking

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	5			2	4			2	0	1	2		

**Transaction ID : SB21B.82388**

Amount of Each Disbursement this Period

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

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Dane County Treasurer**

Mailing Address P.O. Box 2999

City Madison State WI Zip Code 53701

Purpose of Disbursement  
Property Taxes

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	6			1	5			2	0	1	2		

**Transaction ID : SB21B.82247**

Amount of Each Disbursement this Period

6	1	9	3	.	1	3
---	---	---	---	---	---	---

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

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

6	1	9	3	.	1	3
---	---	---	---	---	---	---

6	1	9	3	.	1	3
---	---	---	---	---	---	---



**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. Doc Jams LLC**

Mailing Address 4611 Dovetail Dr #1

City Madison State WI Zip Code 53704

Purpose of Disbursement  
Office machine repair

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	Y
0	6			1	5			2	0	1	2		

**Transaction ID : SB21B.82231**

Amount of Each Disbursement this Period

4	2	6	.	2	3
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Domain Hosting Services**

Mailing Address 900 W Grove Pkwy

City Tempe State AZ Zip Code 85283

Purpose of Disbursement  
6/30 CC Pmt: domain hosting

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	Y
0	5			6	3			2	0	1	2		

**Transaction ID : SB21B.82415**

Amount of Each Disbursement this Period

7	9	.	9	9
---	---	---	---	---

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Domino's**

Mailing Address 409 W Gorham St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
6/25 CC Pmt: food

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	Y
0	5			6	1			2	0	1	2		

**Transaction ID : SB21B.82384**

Amount of Each Disbursement this Period

4	7	.	0	9
---	---	---	---	---

**[MEMO ITEM]**

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

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

4	2	6	.	2	3
---	---	---	---	---	---

4	2	6	.	2	3
---	---	---	---	---	---

**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. Domino's**

Mailing Address 409 W Gorham St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
6/25 CC Pmt: food

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	5		2	9		2	0	1	2

**Transaction ID : SB21B.82391**

Amount of Each Disbursement this Period

1	0	.	4	3
---	---	---	---	---

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. DUFFY FOR CONGRESS**

Mailing Address PO BOX 538

City WAUSAU State WI Zip Code 54402

Purpose of Disbursement  
In-kind - office rent/utilities

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	6		2	9		2	0	1	2

**Transaction ID : SB21B.82175**

Amount of Each Disbursement this Period

4	7	5	.	2	1
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Inc Emmerich & Associates**

Mailing Address 453 Grand Ave

City Schofield State WI Zip Code 54476

Purpose of Disbursement  
Office Rent

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	6		1	2		2	0	1	2

**Transaction ID : SB21B.82216**

Amount of Each Disbursement this Period

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

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

8	9	5	.	2	1
---	---	---	---	---	---

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

8	9	5	.	2	1
---	---	---	---	---	---

**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. ETC Cafe**

Mailing Address 70 Staniford Street

City Boston State MA Zip Code 02114

Purpose of Disbursement  
6/25 CC Pmt: food

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 08 / 2012

Transaction ID : **SB21B.82400**

Amount of Each Disbursement this Period

6.56

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Glass Nickel Pizza**

Mailing Address 5003 University Avenue

City Madison State WI Zip Code 53703

Purpose of Disbursement  
6/25 CC Pmt: food

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 23 / 2012

Transaction ID : **SB21B.82387**

Amount of Each Disbursement this Period

47.30

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Godaddy.com**

Mailing Address 14455 N Hayden Rd

City Scottsdale State AZ Zip Code 85260

Purpose of Disbursement  
6/25 CC Pmt: domain hosting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2012

Transaction ID : **SB21B.82412**

Amount of Each Disbursement this Period

15.98

[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 Rd

City State Zip Code  
Scottsdale AZ 85260

Purpose of Disbursement  
6/25 CC Pmt: 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
05		23		2012

**Transaction ID : SB21B.82414**

Amount of Each Disbursement this Period

23.97
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. GoGo In-Air Online**

Mailing Address 1250 North Arlington Heights Road

City State Zip Code  
Itasca IL 60143

Purpose of Disbursement  
6/25 CC Pmt: internet

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
06		08		2012

**Transaction ID : SB21B.82397**

Amount of Each Disbursement this Period

9.95
------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Heinzen Printing Inc.**

Mailing Address P.O. Box 267

City State Zip Code  
Marshfield WI 54449

Purpose of Disbursement  
Printing

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
06		15		2012

**Transaction ID : SB21B.82236**

Amount of Each Disbursement this Period

105.50
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

105.50
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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. HSP Direct**

Mailing Address 13755 Sunrise Valley Drive

City Herndon State VA Zip Code 20171

Purpose of Disbursement  
direct mail fundraising

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 15 / 2012

**Transaction ID : SB21B.82237**

Amount of Each Disbursement this Period

16106.22

Full Name (Last, First, Middle Initial)

**B. HSP Direct**

Mailing Address 13755 Sunrise Valley Drive

City Herndon State VA Zip Code 20171

Purpose of Disbursement  
Direct Mail Fundraising

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 26 / 2012

**Transaction ID : SB21B.82292**

Amount of Each Disbursement this Period

17715.16

Full Name (Last, First, Middle Initial)

**C. Ian's Pizza**

Mailing Address State Street

City Madison State WI Zip Code 53703

Purpose of Disbursement  
6/25 CC Pmt: food

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 06 / 2012

**Transaction ID : SB21B.82398**

Amount of Each Disbursement this Period

51.42

**[MEMO ITEM]**

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

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

33821.38

**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. iContact Corporation**

Mailing Address 5221 Paramount Pkwy

City Morrisville State NC Zip Code 27560

Purpose of Disbursement  
6/25 CC Pmt: website

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	Y
0	6			0	2			2	0	1	2		

**Transaction ID : SB21B.82421**

Amount of Each Disbursement this Period

1	9	1	.	2	0
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**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Isaacs Parking**

Mailing Address 800 North 4th Street

City Milwaukee State WI Zip Code 53203

Purpose of Disbursement  
6/35 Cc Pmt: parking

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	Y
0	6			0	3			2	0	1	2		

**Transaction ID : SB21B.82419**

Amount of Each Disbursement this Period

4	0	.	0	0
---	---	---	---	---

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. iStream**

Mailing Address 13555 Bishops Ct, Ste 102

City Brookfield State WI Zip Code 53005

Purpose of Disbursement  
Bank fees

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	Y
0	6			0	7			2	0	1	2		

**Transaction ID : SB21B.82213**

Amount of Each Disbursement this Period

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

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

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

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

4	2	.	4	2	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. Jimmy John's**

Mailing Address 527 State Street

City Madison State WI Zip Code 53703

Purpose of Disbursement  
6/25 CC Pmt: food

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.82392**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. LexisNexis**

Mailing Address PO 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

/  /

**Transaction ID : SB21B.82238**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. M&I Bank**

Mailing Address 1 W Main St

City Madison State WI Zip Code 53703-0000

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.82208**

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 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. M&I Bank**

Mailing Address 1 W Main St

City Madison State WI Zip Code 53703-0000

Purpose of Disbursement  
Bank fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.82218**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. M&I Bank**

Mailing Address 1 W Main St

City Madison State WI Zip Code 53703-0000

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.82332**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. M&I Bank**

Mailing Address 1 W Main St

City Madison State WI Zip Code 53703-0000

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.82333**

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 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. M&I Bank Credit Card Processing Center**

Mailing Address Credit Card Processing Center  
P.O. Box 3052

City Milwaukee State WI Zip Code 53201-3052

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

MM / DD / YYYY  
06 / 25 / 2012

Transaction ID : **SB21B.82289**

Amount of Each Disbursement this Period

1218.07

Full Name (Last, First, Middle Initial)

**B. M&I Bank Credit Card Processing Center**

Mailing Address Credit Card Processing Center  
P.O. Box 3052

City Milwaukee State WI Zip Code 53201-3052

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

MM / DD / YYYY  
06 / 25 / 2012

Transaction ID : **SB21B.82290**

Amount of Each Disbursement this Period

2254.40

Full Name (Last, First, Middle Initial)

**C. M&I Merchant Services**

Mailing Address 601 Riverside Avenue

City Jacksonville State FL Zip Code 32204

Purpose of Disbursement  
Credit Card Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 11 / 2012

Transaction ID : **SB21B.82215**

Amount of Each Disbursement this Period

847.21

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

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

5229.68

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

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

FOR LINE NUMBER:  
(check only one)

<input 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. Mike Roark Forestry**

Mailing Address 614 Highcliff Trail

City Madison State WI Zip Code 53718

Purpose of Disbursement  
Tree removal

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 15 / 2012

Transaction ID : **SB21B.82239**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Office Depot**

Mailing Address PO Box 9027

City Des Moines State IA Zip Code 50368

Purpose of Disbursement  
6/25 CC Pmt: 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  
05 / 09 / 2012

Transaction ID : **SB21B.82411**

Amount of Each Disbursement this Period

269.16

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Onyx Hotel**

Mailing Address 1155 Portland Street

City Boston State MA Zip Code 02114

Purpose of Disbursement  
6/25 CC Pmt: staff travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 10 / 2012

Transaction ID : **SB21B.82409**

Amount of Each Disbursement this Period

823.31

[MEMO ITEM]

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

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

1000.00

**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. Open Pantry**

Mailing Address 2675 Sun Valley Drive

City Delafield State WI Zip Code 53018

Purpose of Disbursement  
6/25 CC Pmt: food

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	5		3	0		2	0	1	2

**Transaction ID : SB21B.82417**

Amount of Each Disbursement this Period

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

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Pinnacle Direct, Inc.**

Mailing Address 1560 113th Street North

City Stillwater State MN Zip Code 55082

Purpose of Disbursement  
direct mail fundraising

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	6		1	3		2	0	1	2

**Transaction ID : SB21B.82220**

Amount of Each Disbursement this Period

1	0	0	8	0	.	1	7
---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Pinnacle Direct, Inc.**

Mailing Address 1560 113th Street North

City Stillwater State MN Zip Code 55082

Purpose of Disbursement  
Direct Mail Fundraising

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	6		2	6		2	0	1	2

**Transaction ID : SB21B.82293**

Amount of Each Disbursement this Period

1	1	3	1	9	.	9	8
---	---	---	---	---	---	---	---

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

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

2	1	4	0	.	1	5
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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  
Processing Fees

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 / 30 / 2012

**Transaction ID : SB21B.82298**

Amount of Each Disbursement this Period

124.10

Full Name (Last, First, Middle Initial)

**B. Pizza Hut**

Mailing Address 520 S Park Street

City Madison State WI Zip Code 53715

Purpose of Disbursement  
6/25 CC Pmt: food

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 / 05 / 2012

**Transaction ID : SB21B.82396**

Amount of Each Disbursement this Period

67.69

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
In-kind - equipment transfer

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 / 21 / 2012

**Transaction ID : SB21B.82199**

Amount of Each Disbursement this Period

1158.55

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

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

1282.65

**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. REPUBLICAN NATIONAL COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		22		2012

Mailing Address 310 FIRST STREET SE

**Transaction ID : SB21B.82177**

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

1459.99
---------

Purpose of Disbursement  
In-kind - equipment transfer

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. REPUBLICAN NATIONAL COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		22		2012

Mailing Address 310 FIRST STREET SE

**Transaction ID : SB21B.82179**

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

2655.00
---------

Purpose of Disbursement  
In-kind - equipment transfer

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. REPUBLICAN NATIONAL COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		22		2012

Mailing Address 310 FIRST STREET SE

**Transaction ID : SB21B.82181**

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

2655.00
---------

Purpose of Disbursement  
In-kind - equipment transfer

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

6769.99
---------

**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. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
In-kind - equipment transfer

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 22 / 2012

Transaction ID : **SB21B.82183**

Amount of Each Disbursement this Period

2714.99

Full Name (Last, First, Middle Initial)

**B. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
In-kind - equipment transfer

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 22 / 2012

Transaction ID : **SB21B.82185**

Amount of Each Disbursement this Period

2714.99

Full Name (Last, First, Middle Initial)

**C. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
In-kind - equipment transfer

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 22 / 2012

Transaction ID : **SB21B.82187**

Amount of Each Disbursement this Period

2714.99

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

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

8144.97

# 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. REPUBLICAN NATIONAL COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		22		2012

Mailing Address 310 FIRST STREET SE

**Transaction ID : SB21B.82189**

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

1400.00
---------

Purpose of Disbursement  
In-kind - equipment transfer

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

## B. REPUBLICAN NATIONAL COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		22		2012

Mailing Address 310 FIRST STREET SE

**Transaction ID : SB21B.82191**

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

1400.00
---------

Purpose of Disbursement  
In-kind - equipment transfer

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

## C. REPUBLICAN NATIONAL COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		22		2012

Mailing Address 310 FIRST STREET SE

**Transaction ID : SB21B.82193**

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

2655.00
---------

Purpose of Disbursement  
In-kind - equipment transfer

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

5455.00
---------

**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. REPUBLICAN NATIONAL COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		22		2012

Mailing Address 310 FIRST STREET SE

**Transaction ID : SB21B.82195**

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

1400.00
---------

Purpose of Disbursement  
In-kind - equipment transfer

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. REPUBLICAN NATIONAL COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		22		2012

Mailing Address 310 FIRST STREET SE

**Transaction ID : SB21B.82197**

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

2655.00
---------

Purpose of Disbursement  
In-kind - equipment transfer

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. REPUBLICAN NATIONAL COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		27		2012

Mailing Address 310 FIRST STREET SE

**Transaction ID : SB21B.82201**

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

1400.00
---------

Purpose of Disbursement  
In-kind - equipment transfer

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

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

5455.00
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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. SafeSoft**

Mailing Address 20950 Warner Center Lane

City Woodland Hills State CA Zip Code 91367

Purpose of Disbursement  
6/25 CC Pmt: telephone service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 01 / 2012

**Transaction ID : SB21B.82422**

Amount of Each Disbursement this Period

1341.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. SafeSoft**

Mailing Address 20950 Warner Center Lane

City Woodland Hills State CA Zip Code 91367

Purpose of Disbursement  
Telemarketing hosting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2012

**Transaction ID : SB21B.82287**

Amount of Each Disbursement this Period

1341.00

Full Name (Last, First, Middle Initial)

**C. Sports Grille Boston**

Mailing Address 132 Canal Street

City Boston State MA Zip Code 02114

Purpose of Disbursement  
6/25 CC Pmt: food

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 09 / 2012

**Transaction ID : SB21B.82404**

Amount of Each Disbursement this Period

38.34

[MEMO ITEM]

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

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

1341.00

**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. Steve Brown Direct Mail**

Mailing Address 10045 Whitetail Lane

City Truckee State CA Zip Code 96161

Purpose of Disbursement  
direct mail fundraising

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 13 / 2012

**Transaction ID : SB21B.82219**

Amount of Each Disbursement this Period

9123.45

Full Name (Last, First, Middle Initial)

**B. Steve Brown Direct Mail**

Mailing Address 10045 Whitetail Lane

City Truckee State CA Zip Code 96161

Purpose of Disbursement  
Direct Mail Fundraising

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2012

**Transaction ID : SB21B.82288**

Amount of Each Disbursement this Period

6737.17

Full Name (Last, First, Middle Initial)

**C. The Great Dane Pub**

Mailing Address 123 E Doty St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
6/25 CC Pmt: food

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 25 / 2012

**Transaction ID : SB21B.82390**

Amount of Each Disbursement this Period

190.41

**[MEMO ITEM]**

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

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

15860.62

**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 Old Fashioned**

Mailing Address 23 North Pinckney Street #1

City Madison State WI Zip Code 53703

Purpose of Disbursement  
6/25 CC Pmt: food

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 / 04 / 2012

**Transaction ID : SB21B.82395**

Amount of Each Disbursement this Period

158.65

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Verizon Wireless**

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002

Purpose of Disbursement  
Wireless data cards

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 / 15 / 2012

**Transaction ID : SB21B.82250**

Amount of Each Disbursement this Period

63.37

Full Name (Last, First, Middle Initial)

**C. Verizon Wireless**

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002

Purpose of Disbursement  
Wireless data cards

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 / 15 / 2012

**Transaction ID : SB21B.82251**

Amount of Each Disbursement this Period

158.49

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

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

221.86

**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. Wall Street Journal**

Mailing Address 1211 Avenue of the Americas

City New York State NY Zip Code 10036

Purpose of Disbursement  
6/25 CC Pmt: 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  
05 / 27 / 2012

**Transaction ID : SB21B.82389**

Amount of Each Disbursement this Period

17.29

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Wall Street Journal**

Mailing Address 1211 Avenue of the Americas

City New York State NY Zip Code 10036

Purpose of Disbursement  
6/25 CC Pmt: 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  
05 / 31 / 2012

**Transaction ID : SB21B.82416**

Amount of Each Disbursement this Period

17.29

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Wisc. Dept of Revenue - Sls Tax**

Mailing Address PO Box 93389

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) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 25 / 2012

**Transaction ID : SB21B.82291**

Amount of Each Disbursement this Period

1124.73

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

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

1124.73

**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 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. Wisconsin State Journal**

Mailing Address P.O. Box 8975

City Madison State WI Zip Code 53708

Purpose of Disbursement  
6/25 CC Pmt: 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
05		14		2012

Transaction ID : **SB21B.82413**

Amount of Each Disbursement this Period

4.29
------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Wispolitics**

Mailing Address 14 W. Mifflin Street  
#222

City Madison State WI Zip Code 53703

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
06		01		2012

Transaction ID : **SB21B.82209**

Amount of Each Disbursement this Period

2440.00
---------

Full Name (Last, First, Middle Initial)

**C. WMC**

Mailing Address PO Box 352

City Madison State WI Zip Code 53701

Purpose of Disbursement  
Membership dues

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
06		01		2012

Transaction ID : **SB21B.82211**

Amount of Each Disbursement this Period

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

2990.00
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**TOTAL** This Period (last page this line number only)..... ▶

120313.13
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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 checked="" 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. Republican Party of Wisconsin State Committee**

Date of Disbursement

Mailing Address 148 E Johnson St

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2012

City Madison State WY Zip Code 53703

**Transaction ID : SB22.82014**

Purpose of Disbursement  
Transfer - not FEA

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

175000.00
-----------

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

Mailing Address

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

City State Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

--

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

Mailing Address

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

City State Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

--

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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

175000.00
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**TOTAL** This Period (last page this line number only)..... ▶

175000.00
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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 checked="" 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. Gerald E Couri

Mailing Address 1215 Seitz Drive

City Waukesha State WI Zip Code 53186-6745

Purpose of Disbursement  
Refund National Convention 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	Y	Y
0	6		2	6		2	0	1	2		

Transaction ID : SB28A.82297

Amount of Each Disbursement this Period

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

Category/  
Type

Full Name (Last, First, Middle Initial)

### B.

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	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

Category/  
Type

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	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

Category/  
Type

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

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

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

1	3	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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. American Funds Service Company**

Mailing Address PO Box 6164

City Indianapolis State IN Zip Code 46206

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

/  /

**Transaction ID : SB30B.82282**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Appleton West End Realty**

Mailing Address 512 W College Ave

City Appleton State WI Zip Code 54911

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.82345**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Phil Bartel**

Mailing Address 20725 Vincent Court

City Brookfield State WI Zip Code 53045

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.82301**

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. Dudley Bowlby**

Mailing Address 250 Femrite Drive

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.82269**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Dudley Bowlby**

Mailing Address 250 Femrite Drive

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.82319**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Evan Bradtke**

Mailing Address 215 N Frances St

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.82262**

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. Evan Bradtke**

Mailing Address 215 N Frances St

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

MM / DD / YYYY  
06 / 15 / 2012

**Transaction ID : SB30B.82261**

Amount of Each Disbursement this Period

800.71

Full Name (Last, First, Middle Initial)

**B. Ashley M Burns**

Mailing Address 420 W Gorham #210

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

MM / DD / YYYY  
06 / 15 / 2012

**Transaction ID : SB30B.82255**

Amount of Each Disbursement this Period

2301.00

Full Name (Last, First, Middle Initial)

**C. Charter - Madison**

Mailing Address PO Box 2981

City Milwaukee State WI Zip Code 53201-2981

Purpose of Disbursement  
Internet Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2012

**Transaction ID : SB30B.82341**

Amount of Each Disbursement this Period

225.25

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

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

3326.96

**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. Charter - Madison**

Mailing Address PO Box 2981

City Milwaukee State WI Zip Code 53201-2981

Purpose of Disbursement  
Internet Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.82342**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Charter Communications**

Mailing Address PO Box 3255

City Milwaukee State WI Zip Code 53201-0000

Purpose of Disbursement  
Internet Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.82382**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Alexander R. Combs**

Mailing Address 2734 Chamberlain Ave

City Madison State WI Zip Code 53705

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.82270**

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. Alexander R. Combs**

Mailing Address 2734 Chamberlain Ave

City Madison State WI Zip Code 53705

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  
06 / 29 / 2012

**Transaction ID : SB30B.82320**

Amount of Each Disbursement this Period

554.50

Full Name (Last, First, Middle Initial)

**B. Comcast**

Mailing Address PO Box 34227

City Seattle State WA Zip Code 98124

Purpose of Disbursement  
Internet Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2012

**Transaction ID : SB30B.82343**

Amount of Each Disbursement this Period

285.66

Full Name (Last, First, Middle Initial)

**C. Commonwealth Realty**

Mailing Address 54 E 1st Street

City Fond du Lac State WI Zip Code 54935

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2012

**Transaction ID : SB30B.82347**

Amount of Each Disbursement this Period

800.00

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

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

1640.16

**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. Colleen Coyle**

Mailing Address 3494 Sabaka Trail

City Verona State WI Zip Code 53573

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.82268**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Colleen Coyle**

Mailing Address 3494 Sabaka Trail

City Verona State WI Zip Code 53573

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.82318**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Dean Care**

Mailing Address PO Box 673111

City Milwaukee State WI Zip Code 53267-3111

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

/  /

**Transaction ID : SB30B.82296**

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. Delta Dental**

Mailing Address PO Box 828

City State Zip Code  
Stevens Point WI 54481

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

MM / DD / YYYY  
06 / 26 / 2012

**Transaction ID : SB30B.82295**

Amount of Each Disbursement this Period

426.07

Full Name (Last, First, Middle Initial)

**B. Thomas Dickens**

Mailing Address 420 W. Gorham St

City State Zip Code  
Madison WI 53703-2034

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  
06 / 15 / 2012

**Transaction ID : SB30B.82256**

Amount of Each Disbursement this Period

3214.32

Full Name (Last, First, Middle Initial)

**C. Richard Dickie**

Mailing Address 126 North Blair Street #1

City State Zip Code  
Madison WI 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

MM / DD / YYYY  
06 / 15 / 2012

**Transaction ID : SB30B.82271**

Amount of Each Disbursement this Period

1175.04

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

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

4815.43

**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. Richard Dickie**

Mailing Address 126 North Blair Street #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

MM / DD / YYYY  
06 / 29 / 2012

**Transaction ID : SB30B.82321**

Amount of Each Disbursement this Period

1934.48

Full Name (Last, First, Middle Initial)

**B. Elise Dietsch**

Mailing Address 1100 Glenview Drive

City Baraboo State WI Zip Code 53913

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  
06 / 15 / 2012

**Transaction ID : SB30B.82254**

Amount of Each Disbursement this Period

2171.14

Full Name (Last, First, Middle Initial)

**C. Elise Dietsch**

Mailing Address 1100 Glenview Drive

City Baraboo State WI Zip Code 53913

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  
06 / 29 / 2012

**Transaction ID : SB30B.82300**

Amount of Each Disbursement this Period

1404.37

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

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

5509.99

**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. Evan Dittmer**

Mailing Address W5449 Briarwood Rd

City State Zip Code  
Elkhorn WI 53121

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
06 / 15 / 2012

**Transaction ID : SB30B.82265**

Amount of Each Disbursement this Period

390.46

Full Name (Last, First, Middle Initial)

**B. Jesse Dougherty**

Mailing Address 5203 Autumn Leaf Lane

City State Zip Code  
Madison WI 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

/  /   
06 / 29 / 2012

**Transaction ID : SB30B.82312**

Amount of Each Disbursement this Period

1131.03

Full Name (Last, First, Middle Initial)

**C. Durand Partners LLC**

Mailing Address 6949 Mariner Drive

City State Zip Code  
Racine WI 53406

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
06 / 29 / 2012

**Transaction ID : SB30B.82349**

Amount of Each Disbursement this Period

1100.00

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

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

2621.49



**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. Grace W Eberhart**

Mailing Address 3588 W Hrawatha

City Okemos State MI Zip Code 48864

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  
06 / 15 / 2012

**Transaction ID : SB30B.82264**

Amount of Each Disbursement this Period

1651.94

Full Name (Last, First, Middle Initial)

**B. Grace W Eberhart**

Mailing Address 3588 W Hrawatha

City Okemos State MI Zip Code 48864

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  
06 / 29 / 2012

**Transaction ID : SB30B.82315**

Amount of Each Disbursement this Period

800.71

Full Name (Last, First, Middle Initial)

**C. Inc Emmerich & Associates**

Mailing Address 453 Grand Ave

City Schofield State WI Zip Code 54476

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2012

**Transaction ID : SB30B.82351**

Amount of Each Disbursement this Period

1500.00

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

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

3952.65

**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. Employee Benefits Corporation**

Mailing Address PO Box 44347

City Madison State WI Zip Code 53744-4347

Purpose of Disbursement  
Employee benefits

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	6		1	4		2	0	1	2

**Transaction ID : SB30B.82221**

Amount of Each Disbursement this Period

7	6	.	5	8
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Employee Benefits Corporation**

Mailing Address PO Box 44347

City Madison State WI Zip Code 53744-4347

Purpose of Disbursement  
Employee Benefits

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	6		2	1		2	0	1	2

**Transaction ID : SB30B.82285**

Amount of Each Disbursement this Period

8	0	.	9	3
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Employee Benefits Corporation**

Mailing Address PO Box 44347

City Madison State WI Zip Code 53744-4347

Purpose of Disbursement  
Employee Benefits

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	6		2	6		2	0	1	2

**Transaction ID : SB30B.82294**

Amount of Each Disbursement this Period

2	3	.	6	1
---	---	---	---	---

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

3	9	.	3	5	2
---	---	---	---	---	---

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

3	9	.	3	5	2
---	---	---	---	---	---

**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. Fidelity Property Group**

Mailing Address 1620 S Hastings Way

City Eau Claire State WI Zip Code 54701

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2012

Transaction ID : SB30B.82334

Amount of Each Disbursement this Period

1623.32

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Hatchery Hill Investments**

Mailing Address 1001 Fourier Drive  
#100

City Madison State WI Zip Code 53717

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2012

Transaction ID : SB30B.82352

Amount of Each Disbursement this Period

1200.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Donna Heimbach**

Mailing Address 3002 Dianne Drive

City Middleton State WI Zip Code 53562

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 15 / 2012

Transaction ID : SB30B.82272

Amount of Each Disbursement this Period

351.59

Category/  
Type

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

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

3174.91

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Donna Heimbach**

Mailing Address 3002 Dianne Drive

City Middleton State WI Zip Code 53562

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2012

**Transaction ID : SB30B.82322**

Amount of Each Disbursement this Period

302.28

Full Name (Last, First, Middle Initial)

**B. Hillcrest Properties Ltd**

Mailing Address 2986 County Road PP

City DePere State WI Zip Code 54115

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2012

**Transaction ID : SB30B.82362**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. JBJ Properties**

Mailing Address W178 N9912 Rivercrest Drive

City Germantown State WI Zip Code 53022

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2012

**Transaction ID : SB30B.82360**

Amount of Each Disbursement this Period

1300.00

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

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

2602.28

**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. Brian Kind**

Mailing Address 405 Doral Court

City Waunakee State WI Zip Code 53597

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  
06 / 15 / 2012

**Transaction ID : SB30B.82258**

Amount of Each Disbursement this Period

763.57

Full Name (Last, First, Middle Initial)

**B. Brian Kind**

Mailing Address 405 Doral Court

City Waunakee State WI Zip Code 53597

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  
06 / 29 / 2012

**Transaction ID : SB30B.82309**

Amount of Each Disbursement this Period

763.56

Full Name (Last, First, Middle Initial)

**C. Ethan Komoroske**

Mailing Address 920 Athens Drive

City Green Bay State WI Zip Code 54311

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  
06 / 15 / 2012

**Transaction ID : SB30B.82267**

Amount of Each Disbursement this Period

804.71

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

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

2331.84

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Ethan Komoroske**

Mailing Address 920 Athens Drive

City Green Bay State WI Zip Code 54311

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.82317**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Josef Leveratto**

Mailing Address 16011 Via Sola

City Lake Elsinore State CA Zip Code 92530

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.82302**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Larry Loomis**

Mailing Address 762 Briar Ln

City Beloit State WI Zip Code 53511-0000

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.82273**

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. Larry Loomis**

Mailing Address 762 Briar Ln

City State Zip Code  
Beloit WI 53511-0000

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  
06 / 29 / 2012

**Transaction ID : SB30B.82323**

Amount of Each Disbursement this Period

471.24

Full Name (Last, First, Middle Initial)

**B. David R Luhman**

Mailing Address 616 Bartels St

City State Zip Code  
Monona WI 53718

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  
06 / 15 / 2012

**Transaction ID : SB30B.82274**

Amount of Each Disbursement this Period

556.11

Full Name (Last, First, Middle Initial)

**C. David R Luhman**

Mailing Address 616 Bartels St

City State Zip Code  
Monona WI 53718

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  
06 / 29 / 2012

**Transaction ID : SB30B.82324**

Amount of Each Disbursement this Period

556.05

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

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

1583.40

**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 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. Mills Enterprises LLC**

Mailing Address 4015 80th Street

City Kenosha State WI Zip Code 53142

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.82354**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Alyssa A Moyer**

Mailing Address 118 N Brooks Street  
APT A

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.82257**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Alyssa A Moyer**

Mailing Address 118 N Brooks Street  
APT A

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.82304**

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. Richard C Naslund**

Mailing Address 301 N Sawyer Street

City Oshkosh State WI Zip Code 54902

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2012

**Transaction ID : SB30B.82370**

Amount of Each Disbursement this Period

337.50

Full Name (Last, First, Middle Initial)

**B. Neshek Revocable Trust**

Mailing Address PO Box 218

City Walworth State WI Zip Code 53184

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2012

**Transaction ID : SB30B.82356**

Amount of Each Disbursement this Period

350.00

Full Name (Last, First, Middle Initial)

**C. Northside Molzahn LLC**

Mailing Address 119 North 19th Street

City LaCrosse State WI Zip Code 54601

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2012

**Transaction ID : SB30B.82358**

Amount of Each Disbursement this Period

1200.00

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

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

1887.50

**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. O'Braun Corporation**

Mailing Address 5200 West Loomis Road

City Greendale State WI Zip Code 53129

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.82366**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Parkdale Investments**

Mailing Address 3021 Patton Drive

City Plover State WI Zip Code 54467

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.82368**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Paychex**

Mailing Address 911 Panorama Tr S

City Rochester State NY Zip Code 14625

Purpose of Disbursement  
Payroll Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.82279**

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. Paychex**

Mailing Address 911 Panorama Tr S

City Rochester State NY Zip Code 14625

Purpose of Disbursement  
Unemployment Insurance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.82280**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Paychex**

Mailing Address 911 Panorama Tr S

City Rochester State NY Zip Code 14625

Purpose of Disbursement  
Employer Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.82281**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Paychex**

Mailing Address 911 Panorama Tr S

City Rochester State NY Zip Code 14625

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.82329**

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. Paychex**

Mailing Address 911 Panorama Tr S

City Rochester State NY Zip Code 14625

Purpose of Disbursement  
Unemployment Insurance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2012

**Transaction ID : SB30B.82330**

Amount of Each Disbursement this Period

471.56

Full Name (Last, First, Middle Initial)

**B. Paychex**

Mailing Address 911 Panorama Tr S

City Rochester State NY Zip Code 14625

Purpose of Disbursement  
Payroll Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2012

**Transaction ID : SB30B.82331**

Amount of Each Disbursement this Period

126.80

Full Name (Last, First, Middle Initial)

**C. Katherine Pointer**

Mailing Address 1022 W Johnson ST

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

MM / DD / YYYY  
06 / 15 / 2012

**Transaction ID : SB30B.82266**

Amount of Each Disbursement this Period

631.20

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

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

1229.56

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF WISCONSIN**

Full Name (Last, First, Middle Initial)

**A. Katherine Pointer**

Mailing Address 1022 W Johnson ST

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.82316**

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 53562-0000

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.82325**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Scott R. 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.82275**

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. Phillip Pratt III

Mailing Address 3041 Maple Valley Dr

City Madison State WI Zip Code 53719

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  
06 / 29 / 2012

Transaction ID : SB30B.82305

Amount of Each Disbursement this Period

971.11

Full Name (Last, First, Middle Initial)

### B. Daniel Resch

Mailing Address 2 Northridge Terrace Apt C

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

MM / DD / YYYY  
06 / 15 / 2012

Transaction ID : SB30B.82276

Amount of Each Disbursement this Period

678.42

Full Name (Last, First, Middle Initial)

### C. Daniel Resch

Mailing Address 2 Northridge Terrace Apt C

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

MM / DD / YYYY  
06 / 29 / 2012

Transaction ID : SB30B.82326

Amount of Each Disbursement this Period

643.83

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

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

2293.36

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

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

FOR LINE NUMBER:  
(check only one)

<input 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) <b>A. River City Partners LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 29 / 2012
Mailing Address 3033 Excelsior Blvd 100		<b>Transaction ID : SB30B.82364</b>
City Minneapolis	State MN	
Zip Code 55416	Purpose of Disbursement Office Rent	Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/ Type	
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>B. Mary Sander</b>		Date of Disbursement MM / DD / YYYY 06 / 29 / 2012
Mailing Address 4837 Mueller Lane		<b>Transaction ID : SB30B.82380</b>
City West Bend	State WI	
Zip Code 53095	Purpose of Disbursement Office Rent	Amount of Each Disbursement this Period 750.00
Candidate Name	Category/ Type	
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>C. Kristina Sesek</b>		Date of Disbursement MM / DD / YYYY 06 / 29 / 2012
Mailing Address 4607 Pendleton Ct		<b>Transaction ID : SB30B.82307</b>
City Milton	State WI	
Zip Code 53563	Purpose of Disbursement Payroll	Amount of Each Disbursement this Period 1830.31
Candidate Name	Category/ Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3580.31
<b>TOTAL</b> 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. Silver Fox LLC**

Mailing Address PO Box 511448

City Milwaukee State WI Zip Code 53203

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.82372**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Jeffrey Snow**

Mailing Address 535 W Mifflin 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.82260**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Jeffrey Snow**

Mailing Address 535 W Mifflin 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.82311**

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. Benjamin Sparks**

Mailing Address 148 E Johnson ST

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.82259**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Benjamin Sparks**

Mailing Address 148 E Johnson ST

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.82310**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. The Tarrance Group**

Mailing Address 201 North Union Street  
STE 410

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Polling

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.82249**

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. Sarah Thompson**

Mailing Address 409 W Gorham 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.82277**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Sarah Thompson**

Mailing Address 409 W Gorham 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.82327**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Stephan Thompson**

Mailing Address 148 E Johnson 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.82253**

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. Stephan Thompson**

Mailing Address 148 E Johnson 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

MM / DD / YYYY  
06 / 29 / 2012

**Transaction ID : SB30B.82299**

Amount of Each Disbursement this Period

2778.08

Full Name (Last, First, Middle Initial)

**B. THSC Development**

Mailing Address 2125 S Memorial Place Drive

City Sheboygan State WI Zip Code 53081

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2012

**Transaction ID : SB30B.82376**

Amount of Each Disbursement this Period

360.00

Full Name (Last, First, Middle Initial)

**C. Nicole Tieman**

Mailing Address S57W29595 Saylesville Rd

City Waukesha State WI Zip Code 53189

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  
06 / 15 / 2012

**Transaction ID : SB30B.82263**

Amount of Each Disbursement this Period

2178.05

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

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

5316.13

**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. Nicole Tieman**

Mailing Address S57W29595 Saylesville Rd

City Waukesha State WI Zip Code 53189

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  
06 / 29 / 2012

**Transaction ID : SB30B.82314**

Amount of Each Disbursement this Period

1269.96

Full Name (Last, First, Middle Initial)

**B. Time Warner Cable**

Mailing Address PO Box 3237

City Milwaukee State WI Zip Code 53201-3237

Purpose of Disbursement  
Internet Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2012

**Transaction ID : SB30B.82336**

Amount of Each Disbursement this Period

392.48

Full Name (Last, First, Middle Initial)

**C. Time Warner Cable**

Mailing Address PO Box 3237

City Milwaukee State WI Zip Code 53201-3237

Purpose of Disbursement  
Internet Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2012

**Transaction ID : SB30B.82337**

Amount of Each Disbursement this Period

382.32

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

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

2044.76

**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. Time Warner Cable**

Mailing Address PO Box 3237

City Milwaukee State WI Zip Code 53201-3237

Purpose of Disbursement  
Internet Service

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2012

**Transaction ID : SB30B.82338**

Amount of Each Disbursement this Period

392.49

Full Name (Last, First, Middle Initial)

**B. Time Warner Cable**

Mailing Address PO Box 3237

City Milwaukee State WI Zip Code 53201-3237

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  
06 / 29 / 2012

**Transaction ID : SB30B.82339**

Amount of Each Disbursement this Period

341.63

Full Name (Last, First, Middle Initial)

**C. Time Warner Cable**

Mailing Address PO Box 3237

City Milwaukee State WI Zip Code 53201-3237

Purpose of Disbursement  
Internet Service

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2012

**Transaction ID : SB30B.82340**

Amount of Each Disbursement this Period

382.02

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

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

1116.14

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

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

FOR LINE NUMBER:  
(check only one)

<input 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. Vikersund LLC**

Mailing Address 3215 Tower Ave  
100

City Superior State WI Zip Code 54880

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.82378**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Wangard Partners Inc**

Mailing Address 1200 N Mayfair Road  
220

City Milwaukee State WI Zip Code 53226

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.82374**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Jonathan Wetzel**

Mailing Address 5038 Autumn Leaf Lane

City Madison State WI Zip Code 53704

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.82308**

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. Joshua Wilson**

Mailing Address 641 West 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.82278**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Joshua Wilson**

Mailing Address 641 West 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.82328**

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

/  /

Amount of Each Disbursement this Period

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

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

**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 : H1.82245

**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 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 : H4.82241
Office Depot - 9485
Mailing Address Office Depot Credit Plan
City State Zip Code Des Moines IA 50368-9027
Purpose of Disbursement: Office Supplies
Activity or Event Identifier: Administrative
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 113156.53
Date 06 / 15 / 2012
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
643.61 + 1144.20 = 1787.81

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.82242
Pitney Bowes - Postage
Mailing Address PO Box 371874
City State Zip Code Pittsburgh PA 15250-7874
Purpose of Disbursement: Postage
Activity or Event Identifier: Administrative
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 121095.35
Date 06 / 15 / 2012
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
2857.98 + 5080.84 = 7938.82

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.82248
Shadow Fax
Mailing Address 4601 Helfesen Dr
City State Zip Code Madison WI 53718
Purpose of Disbursement: Office Supplies
Activity or Event Identifier: Administrative
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 121134.92
Date 06 / 15 / 2012
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
14.25 + 25.32 = 39.57

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 3515.84, 6250.36, 9766.20

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

**A.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.82252**  
**Veolia ES Solid Waste Midwest**  
Mailing Address PO Box 6484  
City Carol Stream State IL Zip Code 60197  
Purpose of Disbursement: Waste Removal  
Activity or Event Identifier: **Administrative**  
Category/Type [ ]  
Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date [ ] 121292.35  
Date [ 06 ] / [ 15 ] / [ 2012 ]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[ ] 56.67		[ ] 100.76		[ ] 157.43

**B.** Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
Purpose of Disbursement:  
Activity or Event Identifier:  
Category/Type [ ]  
Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date [ ]  
Date [ ] / [ ] / [ ]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[ ]		[ ]		[ ]

**C.** Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
Purpose of Disbursement:  
Activity or Event Identifier:  
Category/Type [ ]  
Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date [ ]  
Date [ ] / [ ] / [ ]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[ ]		[ ]		[ ]

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[ ] 56.67		[ ] 100.76		[ ] 157.43

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
[ ] 3572.51		[ ] 6351.12		[ ] 9923.63