

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

TIFFANY FOR WISCONSIN, INC.

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2026 To: M M / D D / Y Y Y Y 03 / 31 / 2026

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	0.00	177395.15
(b) Total Contribution Refunds (from Line 20(d))	13750.00	29750.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	- 13750.00	147645.15
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3782.23	320608.41
(b) Total Offsets to Operating Expenditures (from Line 14)	41.00	2523.53
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	3741.23	318084.88
8. Cash on Hand at Close of Reporting Period (from Line 27)	28323.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

TIFFANY FOR WISCONSIN, INC.

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	107156.57
(ii) Unitemized.....	0.00	17610.58
(iii) TOTAL of contributions from individuals ▶	0.00	124767.15
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	52628.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	177395.15
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	41.00	2523.53
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	41.00	179918.68

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	3782.23	320608.41
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	12750.00	23750.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	6000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	13750.00	29750.00
21. OTHER DISBURSEMENTS	0.00	18500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	17532.23	368858.41

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	45814.23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	41.00
25. SUBTOTAL (add Line 23 and Line 24).....	45855.23
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	17532.23
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	28323.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 OF 13	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
TIFFANY FOR WISCONSIN, INC.

Full Name (Last, First, Middle Initial) A. GANNETT		Date of Disbursement MM / DD / YYYY 01 / 07 / 2026
Mailing Address PO BOX 982149		FEC Identification Number C
City EL PASO	State TX	Zip Code 79998-2149
Purpose of Disbursement SUBSCRIPTION	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 19.99	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BCFCC67EE74F14D6B952
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. VERIZON		Date of Disbursement MM / DD / YYYY 01 / 12 / 2026
Mailing Address 140 WEST STREET		FEC Identification Number C
City NEW YORK	State NY	Zip Code 10007
Purpose of Disbursement PHONE BILL	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 210.31	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B851E0CEA577E4CFB809
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FONTANA STORAGE		Date of Disbursement MM / DD / YYYY 01 / 14 / 2026
Mailing Address PO BOX 473		FEC Identification Number C
City FONTANA	State WI	Zip Code 53125-0473
Purpose of Disbursement STORAGE	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 690.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BED0C9C8DD331458CA91
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	920.30
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 13	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIFFANY FOR WISCONSIN, INC.

Full Name (Last, First, Middle Initial) A. ACCOUNTANTS WORLD			Date of Disbursement MM / DD / YYYY 01 / 27 / 2026	
Mailing Address 140 FELL COURT			FEC Identification Number C	
City HAUPPAUGE	State NY	Zip Code 11788	Amount of Each Disbursement this Period 105.00	
Purpose of Disbursement FOR PROCESSING FEE		Category/ Type 001	Transaction ID : BE20AA11AFD4D463789C	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. ISTREAM			Date of Disbursement MM / DD / YYYY 02 / 04 / 2026	
Mailing Address 13555 BISHOPS COURT			FEC Identification Number C	
City BROOKFIELD	State WI	Zip Code 53005	Amount of Each Disbursement this Period 82.90	
Purpose of Disbursement CHECK PROCESSING FEE		Category/ Type 001	Transaction ID : BB78D820408564302A24	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. ACUITY INSURANCE			Date of Disbursement MM / DD / YYYY 02 / 06 / 2026	
Mailing Address PO BOX 718			FEC Identification Number C	
City SHEBOYGAN	State WI	Zip Code 53082	Amount of Each Disbursement this Period 91.00	
Purpose of Disbursement INSURANCE		Category/ Type 001	Transaction ID : B69397283C724409A9D2	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	278.90
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 13			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TIFFANY FOR WISCONSIN, INC.

Full Name (Last, First, Middle Initial) A. VERIZON			Date of Disbursement MM / DD / YYYY 02 / 11 / 2026		
Mailing Address 140 WEST STREET			FEC Identification Number C		
City NEW YORK	State NY	Zip Code 10007	Amount of Each Disbursement this Period 210.23		
Purpose of Disbursement PHONE BILL		Category/ Type 001	Transaction ID : B0BADD75886F64224947		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. ARISTOTLE INTERNATIONAL INC.			Date of Disbursement MM / DD / YYYY 02 / 20 / 2026		
Mailing Address 205 PENNSYLVANIA AVENUE SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 900.00		
Purpose of Disbursement DATABASE SOFTWARE		Category/ Type 001	Transaction ID : B5B891CA4D0554100A67		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. CAPITOL HILL CLUB			Date of Disbursement MM / DD / YYYY 02 / 24 / 2026		
Mailing Address 300 FIRST STREET SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 526.00		
Purpose of Disbursement MEMBERSHIP DUES		Category/ Type 001	Transaction ID : B4F792915B456492F9B0		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1636.23
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 13	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIFFANY FOR WISCONSIN, INC.

Full Name (Last, First, Middle Initial) A. ISTREAM			Date of Disbursement MM / DD / YYYY 03 / 04 / 2026	
Mailing Address 13555 BISHOPS COURT			FEC Identification Number C	
City BROOKFIELD	State WI	Zip Code 53005	Amount of Each Disbursement this Period 82.90	
Purpose of Disbursement CHECK PROCESSING FEE		Category/ Type 001	Transaction ID : BB7660D847E854A2C882	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. WISCO CREATIVE			Date of Disbursement MM / DD / YYYY 03 / 05 / 2026	
Mailing Address 3910 STEWART AVE			FEC Identification Number C	
City WAUSAU	State WI	Zip Code 54401-3947	Amount of Each Disbursement this Period 265.00	
Purpose of Disbursement WEBSITE DOMAIN		Category/ Type 001	Transaction ID : B3A2232553A2E4A4E966	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. VERIZON			Date of Disbursement MM / DD / YYYY 03 / 12 / 2026	
Mailing Address 140 WEST STREET			FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10007	Amount of Each Disbursement this Period 191.21	
Purpose of Disbursement PHONE BILL		Category/ Type 001	Transaction ID : B4662D60E643847099CA	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	539.11
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 13			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TIFFANY FOR WISCONSIN, INC.

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2026		
Mailing Address 300 FIRST STREET SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 45.82		
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : B9187D2F728F244E1847		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	45.82
TOTAL This Period (last page this line number only).....▶	3420.36

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 13	
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
TIFFANY FOR WISCONSIN, INC.

Full Name (Last, First, Middle Initial) A. FEDLER, RONALD, G, ,		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2026
Mailing Address 2584 LUCILLE DR		FEC Identification Number C
City FORT LAUDERDALE	State FL	Zip Code 33316-2324
Purpose of Disbursement REFUND: REFUND OF GENERAL CONTRIBUTION		010
Candidate Name		Amount of Each Disbursement this Period 3500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B64C885323FB44943B27
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. DAVIS, DWIGHT, E, ,		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2026
Mailing Address PO BOX 647		FEC Identification Number C
City SISTER BAY	State WI	Zip Code 54234-0647
Purpose of Disbursement REFUND: REFUND OF GENERAL CONTRIBUTION		010
Candidate Name		Amount of Each Disbursement this Period 1500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B53DE7F6392924A0AAB0
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. BACHENBERG, WILLIAM, , ,		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2026
Mailing Address 3835 MAUCH CHUNK RD		FEC Identification Number C
City ALLENTOWN	State PA	Zip Code 18104-8721
Purpose of Disbursement REFUND: REPAYMENT OF EXCESS CONTRIBUTION		010
Candidate Name		Amount of Each Disbursement this Period 1500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BB02C61B21A0D4F4B873
State: District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	6500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 13			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
TIFFANY FOR WISCONSIN, INC.

Full Name (Last, First, Middle Initial) A. TANENBAUM, RICHARD, , ,			Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2026		
Mailing Address 211 N ROBINSON AVE			FEC Identification Number C		
City OKLAHOMA CITY	State OK	Zip Code 73102-7109	Amount of Each Disbursement this Period 3500.00		
Purpose of Disbursement REFUND: REFUND OF GENERAL CONTRIBUTION		Category/ Type 010	Transaction ID : B04B3787E4FC849F8A41		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. SIMON, KATIE, M, ,			Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2026		
Mailing Address 18 VINJE CT			FEC Identification Number C		
City MADISON	State WI	Zip Code 53716-1887	Amount of Each Disbursement this Period 1500.00		
Purpose of Disbursement REFUND: REFUND OF GENERAL CONTRIBUTION		Category/ Type 010	Transaction ID : BAD42E56D0B4D4F6995E		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. HOLTEBECK, CHARLES, , ,			Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2026		
Mailing Address N5140 THORNAPPLE RD			FEC Identification Number C		
City LADYSMITH	State WI	Zip Code 54848-9408	Amount of Each Disbursement this Period 250.00		
Purpose of Disbursement REFUND: REFUND OF GENERAL CONTRIBUTION		Category/ Type 010	Transaction ID : B7A3BA6432FAD479A974		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	5250.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 13			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
TIFFANY FOR WISCONSIN, INC.

Full Name (Last, First, Middle Initial) A. JEROME, JEROME, K, ,			Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2026		
Mailing Address 580 24TH AVENUE					
City CUMBERLAND	State WI	Zip Code 54829-9421	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND OF GENERAL CONTRIBUTION		Category/ Type 010	Amount of Each Disbursement this Period 1000.00		
Candidate Name		Transaction ID : B997DE1EDBAA447DA8BD			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	12750.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 13	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIFFANY FOR WISCONSIN, INC.

Full Name (Last, First, Middle Initial) A. ARCTIC SLOPE REGIONAL CORPORATION PAC			Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2026
Mailing Address 3900 C STREET SUITE 801			FEC Identification Number C C00511899
City ANCHORAGE	State AK	Zip Code 99503	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement REFUND: REFUND OF GENERAL CONTRIBUTION		Category/ Type 010	Transaction ID : BBEF29B5462574C128E2
Candidate Name ARCTIC SLOPE REGIONAL CORPORATION PAC		Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	1000.00