

Complete Committee Name
BUCKLEY FOR GREEN BAY

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation (if year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
1/29/19	PATRICK D. QUINN 545 LA COUT RD GREEN BAY, WI 54313 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	BUSINESS OWNER	\$1,000. ⁰⁰	\$1,000. ⁰⁰
1/29/19	TIMOTHY J. KUEHN 3965 THREE PENNY CT DE PERE, WI 54115-7944 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	BUSINESS OWNER	\$200. ⁰⁰	\$200. ⁰⁰
1/29/19	DAVID J. TOONEN 2600 GOOD SHEPARD LN GREEN BAY, WI 54313-4700 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	BUSINESS OWNER	\$500. ⁰⁰	\$500. ⁰⁰
	 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
	 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
	 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
	 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 1,700. ⁰⁰	1,700. ⁰⁰
TOTAL ITEMIZED CONTRIBUTIONS	\$ 1,700. ⁰⁰	1,700. ⁰⁰
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$ -	-
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$ 1,700. ⁰⁰	1,700. ⁰⁰

SCHEDULE 1-B

RECEIPTS
Contributions from Committees
(Transfers-In)

Complete Committee Name
BUCKLEY FOR GREEN BAY

Instructions for completing schedules are on the back of each schedule.

Date	Full Name of Committee, Mailing Address and Zip Code	Amount of Contribution
	<p>NA</p> <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p>	
	<p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p>	
	<p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p>	
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	<p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p>	
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	<p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p>	
	<p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p>	
	<p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p>	
SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE		\$ <u>1</u>
TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES		\$ <u>1</u>

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name
BUCKLEY FOR GREEN BAY

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
1/29/19	CLS SERVICES INC. 1172 SOUTH PARK DR. APPLETON, WI 54914.8404 Check if: <input type="checkbox"/> In-Kind Offset	YARD SIGNS	\$ 2,472.75
1/29/19	ARENA COMMUNICATIONS 1780 SEQUOIA VISTA CIRCLE SALT LAKE CITY, UT 84104 Check if: <input type="checkbox"/> In-Kind Offset	LITERATURE DIRECT MAILING	\$ 3,147.00
1/29/19	ARENA COMMUNICATIONS 1780 SEQUOIA VISTA CIRCLE SALT LAKE CITY, UT 84104 Check if: <input type="checkbox"/> In-Kind Offset	LITERATURE DIRECT MAILING	\$ 1,868.00
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 7,487.75
TOTAL ITEMIZED EXPENDITURES	\$ 7,487.75
TOTAL UNITEMIZED EXPENDITURES	\$ —
TOTAL EXPENDITURES	\$ 7,487.75

SCHEDULE 2-B

DISBURSEMENTS
Contributions To Committees
(Transfers-Out)

Complete Committee Name
BUCKLEY FOR GREEN BAY

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code	Amount	Y-T-D Total
	<p><i>NA</i></p> <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p>		
	<p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p>		
	<p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p>		
	<p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p>		
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	<p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p>		
	<p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p>		
SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE		\$ <u> — </u>	<u> — </u>
TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES		\$ <u> — </u>	<u> — </u>

SCHEDULE 3-A

**Incurred Obligations Excluding Loans
ADDITIONAL DISCLOSURE**

Complete Committee Name
BUCKLEY FOR GREEN BAY

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code of Creditor	Outstanding Balance Beginning This Period	New Obligations or Additions This Period	Cumulative Payments This Period	Outstanding Balance At Close of This Period
/ /	NA				
Nature of Debt (Purpose)					
/ /					
Nature of Debt (Purpose)					
/ /					
Nature of Debt (Purpose)					
/ /					
Nature of Debt (Purpose)					
/ /					
Nature of Debt (Purpose)					
/ /					
Nature of Debt (Purpose)					
/ /					
Nature of Debt (Purpose)					

SUBTOTAL ITEMIZED OBLIGATIONS THIS PAGE	\$	—
TOTAL ITEMIZED OBLIGATIONS	\$	—
TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS	\$	—
TOTAL INCURRED OBLIGATIONS	\$	—

**Loans
Individual, Committee or Commercial
ADDITIONAL DISCLOSURE**

Complete Committee Name
BUCKLEY FOR GREEN BAY

Instructions for completing schedules are on the back of each schedule.

	Full Name, Mailing Address and Zip Code of Loan Source NA	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
Date / /					

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
Date / /					

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
Date / /					

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

SUBTOTAL OUTSTANDING LOANS THIS PAGE

\$

TOTAL OUTSTANDING LOANS

\$