CAMPAIGN FINANCE REPORT
STATE OF WISCONSIN

Is This Report an Amendment: ☐ Yes ☒ No

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

RECEIVED
11 MAR 28 PM 2:43
GOVERNMENT ACCOUNTABILITY BOARD
OFFICE USE ONLY

COMMITTEE IDENTIFICATION

Name of Committee: WISCONSIN RIGHT TO LIFE P.A.C. - STATE

Street Address: 10625 W. NORTH AVE - LOWER LEVEL

City, State and Zip Code: MILWAUKEE, WI. 53226

WSEB ID Number: 500640

Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form. ☐

NAME OF REPORT

☐ January Continuing ____ ☐ Pre-Primary ____ ☐ Spring ☐ Fall ☐ Special

☐ July Continuing ____ ☒ Pre-Election 3/21/11 ☐ Spring ☐ Fall ☐ Special

☐ Termination Report *also complete Schedule 4*

SUMMARY OF RECEIPTS AND DISBURSEMENTS	Column A This Period	Column B Calendar Year-To-Date	Audited Totals **Office Use Only**	
1. RECEIPTS				
1A. Contributions (Including Loans) from Individuals	$ 455.51	$ 18,630.51	$	$
1B. Contributions from Committees (Transfers-In)	$ –	$ –	$	$
1C. Other Income and Commercial Loans	$ –	$ –	$	$
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	$ 455.51	$ 18,630.51	$	$
2. DISBURSEMENTS				
2A. Gross Expenditures	$ 1,161.66	$ 18,046.32	$	$
2B. Contributions to Committees (Transfers-Out)	$	$	$	$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	$ 1,161.66	$ 18,046.32	$	$

CASH SUMMARY

Cash Balance Beginning of Report (1/1/2011)	$ 6,191.95	$
Total Receipts	$ 455.51	$
Subtotal	$ 6,647.46	$
Total Disbursements	$ 1,161.66	$
CASH BALANCE END OF REPORT (3/21/11)	$ 5,485.80	$
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	$ –	$
LOANS (Balance at the Close of This Period-3B)	$ –	$

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 Candidate or Treasurer: RICHARD R. FOX JR.

Signature of Candidate or Treasurer: [signature]

Date: 3/24/2011

Daytime Phone: 414-778-5780

NOTE: The information on this form is required by ss.11.60, 11.61, Wis. Stats. ... tion may subject you to the penalties of

EB-2 (Rev. 12/03) This form is ... adison, WI 53701-2973. 608-266-8005

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SCHEDULE 1-A

RECEIPTS
Contributions (Including Loans) From Individuals

1/1/11 - 3/21/11

Complete Committee Name: WISCONSIN RIGHT TO LIFE P.A.C. - STATE #500540

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

Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds $100)	Amount	Calendar Year-to-Date Total
/ /	SEE ATTACHED DETAILED ITEMIZED LISTING OF DONOR RECEIPTS TOTALING $455.00 (42-PAGE DONOR LISTING ATTACHED) Check if: ☐ In-Kind ☐ Conduit ☐ Loan			Office Use
Date / /	Full Name, Mailing Address and Zip Code Check if: ☐ In-Kind ☐ Conduit ☐ Loan	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds $100)		Calendar Year-to-Date Total / Office Use
Date / /	Full Name, Mailing Address and Zip Code Check if: ☐ In-Kind ☐ Conduit ☐ Loan	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds $100)	Amount	Calendar Year-to-Date Total / Office Use
Date / /	Full Name, Mailing Address and Zip Code Check if: ☐ In-Kind ☐ Conduit ☐ Loan	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds $100)	Amount	Calendar Year-to-Date Total / Office Use
Date / /	Full Name, Mailing Address and Zip Code Check if: ☐ In-Kind ☐ Conduit ☐ Loan	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds $100)	Amount	Calendar Year-to-Date Total / Office Use
Date / /	Full Name, Mailing Address and Zip Code Check if: ☐ In-Kind ☐ Conduit ☐ Loan	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds $100)	Amount	Calendar Year-to-Date Total / Office Use
Date / /	Full Name, Mailing Address and Zip Code Check if: ☐ In-Kind ☐ Conduit ☐ Loan	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds $100)	Amount	Calendar Year-to-Date Total / Office Use
Date / /	Full Name, Mailing Address and Zip Code Check if: ☐ In-Kind ☐ Conduit ☐ Loan	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds $100)	Amount	Calendar Year-to-Date Total / Office Use

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	$ 455.00
TOTAL ITEMIZED CONTRIBUTIONS	$ 455.00
TOTAL UNITEMIZED CONTRIBUTIONS $20 OR LESS	$ 0.51
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	$ 455.51

REPORT OF INDEPENDENT DISBURSEMENTS
STATE OF WISCONSIN

1/1/2011 - 3/21/2011

PAGE 1 OF 2

OFFICE USE ONLY

CAMPAIGN ORGANIZATION MAKING INDEPENDENT DISBURSEMENTS	NAME OF REPORT
Name of Organization or Individual: WISCONSIN RIGHT TO LIFE POLITICAL ACTION COMM.	☐ January Continuing _____ ☐ Pre-Primary _____ ☐ Spring
Street Address: 10625 W. NORTH AVE.	☐ July Continuing _____ ☒ Pre-Election 3/21/11 ☐ Fall
City, State and Zip Code: MILWAUKEE, WI. 53226	☐ Special Report of Late Independent Disbursement #500640 ☐ Special

ATTACH ADDITIONAL SHEETS IF NECESSARY

Date Paid	Name and Address of Person or Business to Whom Payment Was Made	Purpose	Amount This Period	Candidate(s) Affected by Disbursement(s) (Include Office Sought)	Supported	Opposed	Office Use Only
2/9/11	FLS CONNECT 7300 HUDSON BLVD #270 ST. PAUL, MN. 55128	GET OUT THE VOTE WISCONSIN ELECTION PHONE CALLS	$660.00	STATE SUPREME COURT-PROSSER	X		
2/24/11	FLS CONNECT 7300 HUDSON BLVD #270 ST. PAUL, MN. 55128	GOTV WI ELECTION PHONE CALLS	$39.36	STATE SUPREME COURT-PROSSER	X		

TOTALS: SEE PAGE 2 OF 2

I, RICHARD R. FOX JR. certify that the information in this report is true, correct and complete.

X _____ Signature of ~~Individual or~~ Treasurer

3/24/2011 Date

THE INFORMATION ON THIS FORM IS REQUIRED BY ss. 11.06 (1), (j), (7), 11.12(6), 11.20, STATS.
FAILURE TO PROVIDE THE INFORMATION MAY SUBJECT YOU TO THE PENALTIES OF ss. 11.60, 11.61, 11.66, STATS.
THIS FORM IS PRESCRIBED BY THE STATE ELECTIONS BOARD, 132 EAST WILSON STREET, SUITE 200, P.O. BOX 2973, MADISON, WI 53702 (608) 266-8005

FB 7 (6/86) (Reformatted 11/99) (Y2K 11/99)

REPORT OF INDEPENDENT DISBURSEMENTS
STATE OF WISCONSIN

1/1/2011 - 3/21/2011

PAGE 2 OF 2

OFFICE USE ONLY

CAMPAIGN ORGANIZATION MAKING INDEPENDENT DISBURSEMENTS

Name of Organization or Individual: WISCONSIN RIGHT TO LIFE POLITICAL ACTION COMM.

Street Address: 10625 W. NORTH AVE.

City, State and Zip Code: MILWAUKEE, WI. 53226

NAME OF REPORT

- [ ] January Continuing _____
- [ ] Pre-Primary _____
- [ ] Spring
- [ ] July Continuing _____
- [x] Pre-Election 3/21/11 #500640
- [ ] Fall
- [ ] Special Report of Late Independent Disbursement
- [ ] Special

ATTACH ADDITIONAL SHEETS IF NECESSARY

Date Paid	Name and Address of Person or Business to Whom Payment Was Made	Purpose	Amount This Period	Candidate(s) Affected by Disbursement(s) (Include Office Sought)	Supported	Opposed	Office Use Only
1/27/11	ASCEDIA, INC. 161 1st STREET MILWAUKEE, WI. 53204	PRORATA COST OF WEBSITE MAINT. FOR VOTER GUIDE INFORMATION	$ 79.30	STATE SUPREME COURT - PROSSER	X		
3/2/11	ASCEDIA, INC. 161 [illegible] STREET MILWAUKEE, WI. 53204	PRORATA COST OF WEBSITE MAINTENANCE TO INCORPORATE VOTER GUIDE INFORMATION	$ 283.00	STATE SUPREME COURT - PROSSER	X		
3/15/11	ASCEDIA INC. (SAME AS ABOVE)	PRORATA COST OF MONTHLY WEBSITE MAINTENCE	$ 100.00	STATE SUPREME COURT - PROSSER	X		

2 - PAGE TOTAL: $ 1,161.66

I, RICHARD R. FOX JR. certify that the information in this report is true, correct and complete.

X _____ Signature of ~~Individual or~~ Treasurer

03/24/2011 Date

THE INFORMATION ON THIS FORM IS REQUIRED BY ss. 11.06 (1), (j), (7), 11.12(6), 11.20, STATS.
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THIS FORM IS PRESCRIBED BY THE STATE ELECTIONS BOARD, 132 EAST WILSON STREET, SUITE 200, P.O. BOX 2973, MADISON, WI 53702 (608) 266-8005

CAMPAIGN TREASURER'S REPORT -- ITEMIZED CONTRIBUTIONS

(1) Name Wisconsin Right to Life, Inc. State PAC #

(2) I.D. Number #500640

(3) Cover Period 01/01/11 **through** 03/21/11

(4) Page 1 **of** 2

(5) Date / (6) Sequence Number	(7) Full Name (Last,First,Suffix,Middle) Street Address & City, State, Zip Code	(8) Contributor Type	(8) Contributor Occupation	(9) Cont Type	(10) InKind Desc	(11) Amend	(12) Amount
01/03/11 1	Mrs. Dottie Alcorn 258 S Polk St Lancaster, WI 53813-1545	I		CH			15.00
01/03/11 2	Mrs. Evelyn Wanta W169N11570 Biscayne Dr Germantown, WI 53022-3284	I		CH			25.00
01/03/11 3	Dr. & Mrs. Robert Kortsch 920 W Whitefish Rd Prt Washingtn, WI 53074-1441	I		CH			100.00
01/03/11 4	Mrs Margaret Muehlenkamp 1400 Redfield St Apt 3 La Crosse, WI 54601-5700	I		CH			35.00
01/03/11 5	Mr. & Mrs. Kenneth Schopen 514 Adams St Fort Atkinson, WI 53538-1404	I		CH			30.00
01/11/11 6	Mr. & Mrs Willard Herman 3744 Enterprise Dr Sheboygan, WI 53083-2084	I		CH			50.00
01/11/11 7	Mrs. Audrey Held 2635 2 1/4 St Cumberland, WI 54829-9461	I		CH			35.00
01/11/11 8	Mr. William Owens 7201 41st Ave Kenosha, WI 53142-1925	I		CH			15.00
01/11/11 9	Mrs. Margaret Bamberg 5531 Long Ct Appleton, WI 54914-9112	I		CH			30.00

CAMPAIGN TREASURER'S REPORT -- ITEMIZED CONTRIBUTIONS

(1) Name Wisconsin Right to Life, Inc. STATE PAC

(2) I.D. Number # S00640

(3) Cover Period 01/01/11 **through** 03/21/11

(5) Date / (6) Sequence Number	(7) Full Name (Last,First,Suffix,Middle) Street Address & City, State, Zip Code	(8) Contributor Type	(8) Contributor Occupation	(9) Cont Type	(10) InKind Desc	(11) Amend	(12) Amount
01/11/11 10	Mrs. Lois Tangas 5702 Black Lake Rd Rhinelander, WI 54501-8772	I		CH			50.00
01/25/11 11	Sue Kazmierzak 1950 Center St East Troy, WI 53120-1208	I		CH			10.00
01/25/11 12	Mr. & Mrs. William McGlone 309 N 8th St Hilbert, WI 54129-9243	I		CH			30.00
02/16/11 13	Ms. Joyce Hoffman 107 E Minerva St New London, WI 54961-2542	I		CH			5.00
02/28/11 14	Mr. & Mrs. James Albrecht 7144 Lone Elm Dr Racine, WI 53402-1248	I		CH			5.00
02/28/11 15	Mrs. Mary Tetzlaff N5886 Lakeview Ct W Onalaska, WI 54650-9611	I		CH			20.00

Cumulative Total 455.00

SCHEDULE 2-A

DISBURSEMENTS

Gross Expenditures

1/1/11 - 3/21/2011

Complete Committee Name

WISCONSIN RIGHT TO LIFE P.A.C. - STATE #500640

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	Office Use
/ /	Check if: ☐ In-Kind Offset		NONE	
Date / /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: ☐ In-Kind Offset	Specific Purpose of Expenditure	Amount	Office Use
Date / /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: ☐ In-Kind Offset	Specific Purpose of Expenditure	Amount	Office Use
Date / /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: ☐ In-Kind Offset	Specific Purpose of Expenditure	Amount	Office Use
Date / /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: ☐ In-Kind Offset	Specific Purpose of Expenditure	Amount	Office Use
Date / /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: ☐ In-Kind Offset	Specific Purpose of Expenditure	Amount	Office Use
Date / /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: ☐ In-Kind Offset	Specific Purpose of Expenditure	Amount	Office Use
Date / /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: ☐ In-Kind Offset	Specific Purpose of Expenditure	Amount	Office Use
Date / /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: ☐ In-Kind Offset	Specific Purpose of Expenditure	Amount	Office Use
Date / /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: ☐ In-Kind Offset	Specific Purpose of Expenditure	Amount	Office Use

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	$	0.00
ATTACHED ITEMIZED INDEPENDENT EXPENDITURES	$	1,161.66
TOTAL ITEMIZED EXPENDITURES	$	1,161.66
TOTAL UNITEMIZED EXPENDITURES $20 OR LESS	$	—
TOTAL EXPENDITURES	$	1,161.66