Mall or fax or email to: Wisconsin Ethics Commission, P.O. Box 7984, Madison, WI 53707-7984; Fax: (608) 284-9319; Email: ethics@wi.gov

Statement of Economic Interests

FOR EXPLANATIONS, EXAMPLES AND EXCEPTIONS SEE THE INSTRUCTIONS OR VISIT OUR WEBSITE AT http://ethics.wi.gov. Still have questions? For priority service send an e-mail to: ethics.wi.gov; otherwise call (608) 266-8123. **Attach additional pages as needed/Please See Instructions.**

Part A

As of December 31, 2016

1. INVESTMENTS.

a) Funds Available in Wisconsin Deferred Compensation Program. These funds are available to participants in the Wisconsin Deferred Compensation program and many of them are also available for direct purchase, independent of that program. If you held an investment of \$5,000 or more in any of these funds – either directly or through the program – please check the appropriate box.

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|--|-------------------------|--------------------------|--|--|-------------------------|--------------------------|-----|--|------------------------|-------------------------|--|
| | \$5,000 to \$50,0000 | More than \$50,000 | | | \$5,000 to \$50,0000 | More than \$50,000 | | | \$5,000 to \$60,000 | More than \$50,00 | |
| Profile Series Vanguard Retirement 2055 Fund Vanguard Retirement 2045 Fund | | | | Small Cap BlackRock Russell 2000 Index - T | | | | Bond BlackRock US Debt Index Fund | | 100 | |
| Vanguard Retirement 2035 Fund | | | | DFA US Mioro Cap | | | | Federated US Government Securities 2-5 Yr. | | | |
| Vanguard Retirement 2026 Fund | | | | Mid Cap: BlackRock Mid Cap Equity Index - F | | | | Vanguard Long- Term Investment Grade Adm | | | |
| Vanguard Retirement 2015 Fund | 10 20 | | | T. Rowe Price Mid Cap Growth | | | | Money Market Vanguard Admiral Treasury Money Market | | | |
| Vanguard Target Retirement Income Fund | | | | Large Cap Calvert Social Investment Equity I | | | | Fixed Stable Value Fund | | | |
| international American Funds EuroPacific | | | | Fidelity Contrafund | | | | FDIC Bank Option | | | |
| BlackRock EAFE Equity Index - T | | | Sept. 2 | Vanguard Institutional Index Fund Plus | | | | Brokerage Schwab SDB Money Market | | | |
| | | | Sales of the sales | Vanguard Wellington Fund - Admiral | | | | Schwab SDB Securities | | | |

b) Other Investments. List stocks, bonds, limited partnerships, Wisconsin governmental securities, and mutual and money market funds in which you and your family's interest was valued at \$5,000 or more.

| | Ty | pe of sec | Amount - "√" one | | | | |
|---------------------------------|------------------------------|-----------|------------------------|---------------------------------------|--------------------------------------|------------------------|-----------------------|
| Name of security | Stock/ option/ futures | Bond | Limited partnership | Wisconsin governmental security | Mutual or money market fund | \$5,000 to \$50,000 | More than \$50,000 |
| American Century Equity Income | 14 | | | | X | × | |
| Baind Short Term Bond Inst 1 Cl | | | | | X | X | |
| Billings VA Var 070149 | | X | | | | X | |
| Blackrock Strategic Income | | | | | * | X | |
| Blackvock High HeldBend | | | | | х | × | |

JOEL C. KITCHENS & SHERRY BILLETT PART A, 1B OTHER INVESTMENTS CONTINUATION SHEET DATA THROUGH 12/31/16

| NAME | DATA THROUGH 12/31/16 | | ورود است | | | | · · · · · · · · · · · · · · · · · · · | |
|--|-------------------------------|----------|----------|---------------------------------------|--------------|--|---------------------------------------|-----------|
| NAME | | 1 1 | | | | MUTUAL OR | | |
| NAME | | | | ļ | WISCONSIN | MONEY | | |
| NAME | | OPTION/ | | LIMITED | GOVERNMENTAL | MARKET | \$5,000 TO | MORE THAN |
| DODGE & COX INCM | NAME | FUTURES | BOND | PARTNERSHIP | SECURITY | FUND | \$50,000 | \$50,000 |
| GENERAL MONEY MARKET, CLASS A | DODGE & COX INCM | | | | | X | | |
| HARBOR INTL | FMI LARGE CAP | | | | | X | X | |
| HARBOR SMCP VAL I | GENERAL MONEY MARKET, CLASS A | | | | | Х | Х | |
| INSURED DEPOSIT U.S. BANK | HARBOR INTL I | | | | | X | Х | |
| INSURED DEPOSIT U.S. BANK | HARBOR SMCP VAL I | | | | | Х | Х | |
| JH INC | INSURED DEPOSIT U.S. BANK | | | | | Х | | |
| JOHN HANCOCK CLASSIC VALUE | JH INC I | | | | | | | |
| LOOMIS SAYLES GRW Y | JOHN HANCOCK CLASSIC VALUE | 1 | | | | | | |
| MAINSTY EPO GLB EQ I | LOOMIS SAYLES GRW Y | | | | | | | |
| METWEST T/R BD I | MAINSTY EPO GLB EO I | | | | | | | |
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| NICOLET BANKSHARES | | <u> </u> | Х | | <u> </u> | | | |
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| SCHNEIDER VAR 070143 X X STERLING MID VAL I X X X STERLING SMCP VAL I X X X T ROWE GRW STK X X X TOUCH SANDS CP SEL GRW Y X X X TOUCH SMCP Y X X X VNGRD 500 IDX ADML X X X | | | | · · · · · · · · · · · · · · · · · · · | | ************************************** | | |
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| T ROWE GRW STK X X X TOUCH SANDS CP SEL GRW Y X X X TOUCH SMCP Y X X X VNGRD 500 IDX ADML X X X | STERLING SMCP VAL I | | | | | | | |
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| VNGRD 500 IDX ADML X X | | | | , | | | | |
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| | WF E/MKT EQ I | | | | | X | X | |

| | a 10% or greater into | | | | | | |
|---|---|---|---|----------------------------------|---|---|----------------|
| a) Enterprise(s) operating unde | r a business or tra | ade name. li: | st here. | | | | |
| Name of business | Municipality or Town | County | State | _ | Describe nature of | f business | |
| Peninsola Veterima/Service | ed a St. Bow | Dool | wil | Vereo | mary fra | حالات | |
| Resognitude sentel | Streee on Por | | Tu | -Case | he borne | 1 | |
| | 3 7 | | | | 9 | 7 | |
| | | - | | • | | 1 | |
| b) Enterprise(s) NOT operating Street address or fire number | Municipality or Town | County | State | ere. | Describe nature of | *************************************** | |
| 6654 county Huy T | Sturgeon Buy | DOOR | wI | reus | Drober - | <u> </u> | |
| 1 | | | | | | _/ | |
| | | | | | | | |
| COMMERCIAL CUSTOMERS, C corporation, service corporation (S reported in Item 2 from which the f list businesses, organizations, and | SC), limited liability iler or a member of lobbyists that paid Check if the organ | company (L f the filer's in the enterprise elization authorize | LC), part nmediate a \$10,000 ad you to re | nership, family re or more | or income-prod ceived \$10,000 in calendar yea its dealings with | ucing rea | ıl es |
| | | - | agent, spor | esperson, o | or representativé. | | A |
| usinesses, organizations, lobbylsts that we | ere customers, clients, | or tenants | | | City | State | ", |
| | | | | | | | + |
| | | *************************************** | | | | | - |
| | • | | | | | | |
| BUSINESS PARTNERS. For each than yourself), unless the information is usiness | already registered w | under Item 2, ith the Wiscon ers, or officers | sin Depart | ment of Fi | artners, officers, a nancial Institution City | s. | rs (o State |
| | | | | | | | State |
| | | | | | | | State |
| | | | | : | | | Siale |
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| NON-COMMERCIAL REAL ESTA | TE List the specific | logation of M | /ISCONE! | N DEAL S | CTATE in which | MOIL OF VO | |
| had an interest (except your principal re | sidence and real esta | c location of Wate whose loca | /ISCONSI | N REAL E | ed in item 2). | | |
| had an interest (except your principal re Locaтio | sidence and real esta ON OF PROPERTY Municipality | ate whose loca | tion you a | N REAL E | od in item 2). NATURE OF (own, lease | INTEREST e, option, | ur fa |
| had an interest (except your principal re LOCATIO | sidence and real esta ON OF PROPERTY | ate whose loca | /ISCONSI tion you a County | N REAL E | ed in item 2). NATURE OF | INTEREST e, option, | ur fa |
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| had an interest (except your principal re Locaтio | sidence and real esta ON OF PROPERTY Municipality | ate whose loca | tion you a | N REAL E | od in item 2). NATURE OF (own, lease | INTEREST e, option, | ur fa |
| had an interest (except your principal re LOCATIO | sidence and real esta ON OF PROPERTY Municipality | ate whose loca | tion you a | N REAL E | od in item 2). NATURE OF (own, lease | INTEREST e, option, | ur fa |
| had an interest (except your principal re LOCATIO reet address or fire number OFFICERS AND DIRECTORS. Lis | sidence and real esta N OF PROPERTY Municipality Or Town | ate whose loca | County | ready liste | ed in item 2). NATURE OF (own, leasement, lai | INTEREST e, option, nd contract | ur fa |
| LOCATION LIFE NUMBER OFFICERS AND DIRECTORS. Liss listed in Item #2.) | sidence and real esta ON OF PROPERTY Municipality Or Town | ich you or a fa | County | ready liste | od in item 2). NATURE OF (own, leasement, lan | INTEREST e, option, nd contract | ur fa |
| had an interest (except your principal re LOCATIO Ireet address or fire number OFFICERS AND DIRECTORS. Lis | sidence and real esta N OF PROPERTY Municipality Or Town | ich you or a fa | County | ready liste | ed in item 2). NATURE OF (own, leasement, lai | INTEREST e, option, nd contract | ur fa |
| had an interest (except your principal re LOCATIO reet address or fire number OFFICERS AND DIRECTORS. Lis listed in Item #2.) | sidence and real esta ON OF PROPERTY Municipality Or Town | ich you or a fa | County | ready liste | od in item 2). NATURE OF (own, leasement, lan | INTEREST e, option, nd contract | ur fa |

| Business or organization | | | | City | State |
|--|--|--|---|--|-----------------------|
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| | | | <u> </u> | | |
| . CREDITORS. List creditors to | which you or your family ow | ed \$5,000 or more. | | | |
| | | | | 1, | ′" оле |
| | | | | \$50,000 | More that \$50,000 |
| Creditor | | City | State | or less | Ψ00,000 |
| Vicolet Bank | | Green Buy | WI | | X |
| | | 1 | | | |
| | | | | | |
| | | | | <u> </u> | |
| Part B | | | For cale | endar yea | ar 2016 |
| | | | | | |
| EMPLOYERS. List your and y Name of employer | our family's EMPLOYERS (\$ | 61,000 or more of income | e) in 2016. | | |
| If State of Wisconsin, identify agency or | | State | Nature of employe | | |
| LISCONSIN Hade Acqui | | WI State 12 | epresontal | ine, | |
| Peninsula Verterinary Ser | vielesia Stureou B | west Veterina | سهده اس | | |
| | | 1 | | | |
| | | | | | |
| | | | | | |
| D. ADDITIONAL SOURCES OF in 2016. | FINCOME. List other sour | ces from which you or y | our family received | d income of \$ | ,000 or m |
| ource of income | | | | City | State |
| | | | | | |
| | | , , , , , , , , , , , , , , , , , , , | | | |
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| . ENTERTAINMENT AND GIF | TS. List individuals and o | rganizations that provide | ed <i>you</i> with enterta | ainment or gif | l ts (more th |
| \$50) in 2016. | TS. List individuals and o | rganizations that provide | ed you with enterta | | |
| \$50) in 2016. | TS. List individuals and o | rganizations that provide | ed <i>you</i> with enterta | ainment or gif | |
| \$50) in 2016. | TS. List individuals and o | rganizatlons that provide | ed you with enterta | | |
| \$50) in 2016. Jame of provider | | | | City | State |
| \$50) in 2016. Jame of provider 2. HONORARIA AND EXPENS | SES. List, for 2016, sour | nes of honoraria and pa | ayment of expens | City | State |
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| \$50) in 2016. Name of provider 2. HONORARIA AND EXPENS government duties (more than \$50 ayer I have read the accompanying interests in true, complete, and colf any part has been left blank, I | SES. List, for 2016, source to previously reported to Approximate value of expenses instructions and certify the correct to the best of my k have done so intentionally | the information control because there is notification. | ayment of expense or commission. Circumstance or commission, and belief, aing to report, | City es related to es of receipt ement of Ecc | State your state |
| 2. HONORARIA AND EXPENS government duties (more than \$5 Payer I have read the accompanying interests in true, complete, and a lift any part has been left blank, I | SES. List, for 2016, source to the second se | the information control because there is notification. | ayment of expensommission. Circumstance ained in this State | City es related to es of receipt ement of Ecc | State your state |

The information sought in this form is required by §§19.43 and 19.44, Wisconsin Statutes. Failure to file a completed form by the statutory deadline may result in a forfeiture of up to \$500. Statements of Economic Interests are open for public inspection. The Wisconsin Ethics Commission will notify you of the identity of any person who examines your Statement. In accordance with §15.04(1)(m), Wisconsin Statutes, the Wisconsin Ethics Commission states that no personally identifiable information is likely to be used for purposes other than those for which it is collected.

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