

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

MILWAUKEE COUNTY
ELECTION COMMISSION

Is This Report an Amendment: Yes No

2015 AUG -1 P 12:30

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

COMMITTEE IDENTIFICATION

Name of Committee

FRIENDS OF CHARLIE FOX

Street Address

2920 W McKINLEY BLD

City, State and Zip Code

MILWAUKEE WI 53208

RECEIVED

OFFICE USE ONLY

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 2015 Pre-Primary Spring Fall Special

July Continuing Pre-Election Spring Fall Special

Termination Report
also complete Schedule 4

SUMMARY OF RECEIPTS AND DISBURSEMENTS

| | Column A This Period | Column B Calendar Year-To-Date |
|--|-------------------------|--------------------------------------|
| 1. RECEIPTS | | |
| 1A. Contributions (Including Loans) from Individuals | \$ 2525. - | \$ 16156.54 |
| 1B. Contributions from Committees (Transfers-In) | \$ - | \$ |
| 1C. Other Income and Commercial Loans | \$ - | \$ |
| TOTAL RECEIPTS (Add totals from 1A, 1B and 1C) | \$ 2525. - | \$ 16956.54 |
| 2. DISBURSEMENTS | | |
| 2A. Gross Expenditures | \$ 3558.47 | \$ |
| 2B. Contributions to Committees (Transfers-Out) | \$ - | \$ |
| TOTAL DISBURSEMENTS (Add totals from 2A and 2B) | \$ 3558.47 | \$ |

CASH SUMMARY

| | | |
|---|------------|---|
| Cash Balance Beginning of Report | \$ 1167.01 | ✓ |
| Total Receipts | \$ 2525. - | ✓ |
| Subtotal | \$ 3692.01 | ✓ |
| Total Disbursements | \$ 3558.47 | ✓ |
| CASH BALANCE END OF REPORT | \$ 133.54 | ✓ |
| INCURRED OBLIGATIONS (Balance at the Close of This Period-3A) | \$ 1860. - | ✓ |
| LOANS (Balance at the Close of This Period-3B) | \$ 3200. - | ✓ |

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete. AC

| | | |
|--|-------------------------------------|----------------|
| Type or Print Name of Candidate or Treasurer | Signature of Candidate or Treasurer | Date: 9/4/2015 |
| Joyce Ann Seiser | Joyce A Seiser | |
| | Email | Daytime Phone: |

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.