

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

Is This Report an Amendment: Yes No

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

MILWAUKEE COUNTY
ELECTION COMMISSION

2015 AUG -1 P 12:30

RECEIVED

OFFICE USE ONLY

COMMITTEE IDENTIFICATION

Name of Committee

FRIENDS OF CHARLIE FOX

Street Address

2920 W MCKINLEY BLVD

City, State and Zip Code

MILWAUKEE WI 53208

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 2015 Pre-Election _____ Spring _____ Fall _____ Special _____

Termination Report
also complete Schedule 4

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

Column A
This Period

Column B
Calendar
Year-To-Date

1A. Contributions (Including Loans) from Individuals

\$ 2964.54 \$ 2964.54

1B. Contributions from Committees (Transfers-In)

\$ 26. - \$ 26.00

1C. Other Income and Commercial Loans

\$ - \$ -

TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)

\$ 2990.54 \$ 2990.54

2. DISBURSEMENTS

2A. Gross Expenditures

\$ 2987.08 \$ 2987.08

2B. Contributions to Committees (Transfers-Out)

\$ - \$ -

TOTAL DISBURSEMENTS (Add totals from 2A and 2B)

\$ 2987.08 \$ 2987.08

CASH SUMMARY

Cash Balance Beginning of Report

\$ 133.54 ✓

Total Receipts

\$ 2990.54 ✓

Subtotal

\$ 3124.08 ✓

Total Disbursements

\$ 2987.08 ✓

CASH BALANCE END OF REPORT

\$ 137. - ✓

INCURRED OBLIGATIONS

(Balance at the Close of This Period-3A)

\$ 600. - ✓

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.

Type or Print Name of Candidate or Treasurer

Signature of Candidate or Treasurer

Date: 9/4/2015

Joyce Ann Seiser

Joyce Ann 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.

GAB-2L (Rev. 04/14) This form is prescribed by the Government Accountability Board. Completed forms must be filed with your local clerk.

Contributions (Including Loans) From Individuals

Complete Committee Name

FRIENDS OF CHARLIE FOX

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 |
|---------|--|---|-----------------------|-----------------------------|
| 2/19/15 | BRENDA LEWISON 1214 N 49 ST MILWAUKEE 53208 | | 50. 50. | 50. |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name: | | |
| 2/11/15 | CHARLES KAHN 3043 N Summit Ave MILWAUKEE 53211 | LAWYER - SELF EMPLOYED A NEUTRAL VIEW 3043 N Summit Ave MILWAUKEE WI 53211 | \$160. | 160 |
| | Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name: | | |
| 2/14/15 | TERRY MILLS 3537 SKINNICK HILL MILWAUKEE 53207 | AURORA PSYCH HOSP 1220 DEWEY AVE WAUKESHA WI 53013 | \$200. | 200 |
| | Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name: | | |
| 2/14/15 | TERRY MILLS " | " | \$25. | 225 |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name: | | |
| 2/11/15 | TODD LOE 3735 S MARCY ST MILWAUKEE 53208 | | \$55. | 55. |
| | Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name: | | |
| 2/14/15 | TODD LOE " | | \$45. | 100. |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name: | | |
| 2/14/15 | SONJA LOE " | | \$15. | 15. |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name: | | |
| 2/14/15 | JANICE STIFFORD 7813 W CLARKE ST WAUKESHA 53213 | | \$70. | 70. |
| | Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name: | | |

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$620.

TOTAL ITEMIZED CONTRIBUTIONS

\$2964.54

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS

\$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$2964.54

RECEIPTS

Contributions (Including Loans) From Individuals

Complete Committee Name

FRIENDS OF CHARLIE FOX

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 |
|---------|---|---|---------|-----------------------------|
| 2/14/15 | MAYHOLA MOWA 1642 N 16 ST MILWAUKEE 53205 | | \$100.- | 100.- |
| 2/14/15 | JOHNNY ZABRODNIK 3864 N MURRAY AVE MILWAUKEE WI 53211 | STUDENT UNIV. OF WIS - MILWAUKEE | \$75.- | 75.- |
| 2/14/15 | CHRIS ROCKWOOD 3448 N 73 ST WILKATOSA 53213 | NOT EMPLOYED | \$250.- | 250.- |
| 2/14/15 | ALAN JABERG 3276 N 47 ST MILWAUKEE 53216 | | \$55.- | 55.- |
| 2/14/15 | JEFF HYNES 3815 CAIDEN LN BROOKFIELD 53005 | | \$20.- | 20.- |
| 2/14/15 | GARY GOYKE 130 LAKEWOOD BL MADISON 53704 | GOYKE & ASSOCIATES 130 LAKEWOOD BL MADISON WI 53704 | \$145.- | 145.- |
| 2/14/15 | CERIL STEPHEN 2528 SPINE AVE MILWAUKEE 53207 | | \$30.- | 30.- |
| 2/14/15 | PATTI KENTING KANN 759 N MILWAUKEE ST MILWAUKEE 53202 | | \$100.- | 100.- |

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$775.-

TOTAL ITEMIZED CONTRIBUTIONS

\$775.-

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS

\$ -

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$775.-

DISBURSEMENTS
Gross Expenditures

Complete Committee Name

FRIENDS OF CHARLIE FOX

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 |
|-----------------------|---|--|---------------------------|
| 2-13-15 | CERMAK 1541 MILLER PARK WAY WEST MILWAUKEE | FOOD FOR FUNDRAISER | 59.28 59.28 |
| 2-13-15 | GFS 2064 MILLER PARK WAY WEST MILWAUKEE 53214 | " | \$34.36 |
| 8/19/15 8/25 | THIRD SECTOR CREATIVE 2310 N 68 ST WALWATOSA 53213 | CAMPAIGN MARKETING CONSULTANT | \$1500.- |
| 2-14-15 | CHARLES LAHN | DEBT REDUCTION FUNDRAISER CONTRIBUTION TO SILENT AUCTION | \$160.- |
| 2-14-15 | TERRY MILLS | " | \$200.- |
| 2-14-15 | TODD LOE | " | \$55.- |
| 2-14-15 | JANICE GIFFORD | " | \$76.- |
| 2-14-15 | MAYHOUA MOUA | " | \$100.- |
| 2-14-15 2/12-14/15 | JILL CLEMENT CHARLES FOX | " FUNDRAISER | \$241.92 876.65 |

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE

\$ ~~2960.08~~
2987.08

TOTAL ITEMIZED EXPENDITURES

\$ ~~2960.08~~
2987.08

TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS

\$ —

TOTAL EXPENDITURES

\$ 2987.08
~~2960.08~~