

2015 APR -1 P 2:24

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CAMPAIGN FINANCE REPORT
STATE OF WISCONSIN
GAB-2

RECEIVED

COMMITTEE IDENTIFICATION

Filing Period Name:	Spring Pre-Election 2015 (/ 20th Senate Special) Covers all activity from 01/01/2015 through 03/23/2015	OFFICE USE ONLY GAB ID: 0500909
Name of Committee/Corporation:	WI Nurses/Health Professionals	
Street Address:	9620 West Greenfield Road	
City, State and Zip:	West Allis, WI 53214-2645	

SUMMARY OF RECEIPTS AND DISBURSEMENTS	Column A This Period	Column B Calendar Year-To-Date
1. RECEIPTS		
1A. Contributions (Including Loans) from Individuals	\$6,484.00	\$6,484.00
1B. Contributions from Committees (Transfers-In)	\$0.00	\$0.00
1C. Other Income and Commercial Loans	\$0.00	\$0.00
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$6,484.00	\$6,484.00
2. DISBURSEMENTS		
2A. Gross Expenditures	\$1,750.00	\$1,750.00
2B. Contributions to Committees (Transfers-Out)	\$4,145.36	\$4,145.36
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$5,895.36	\$5,895.36

CASH SUMMARY

Cash Balance Beginning of Report* 1/1/15	\$1,830.74	
Total Receipts	\$6,484.00	
Subtotal	\$8,314.74	
Total Disbursements	\$5,895.36	
CASH BALANCE END OF REPORT* 3/23/15	\$2,419.38	
INCURRED OBLIGATIONS		
(Balance at the Close of This Period-3A)	\$0.00	
LOANS (Balance at the Close of This Period-3B)	\$0.00	

*Cash Balance as reported by committee

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: Owley, Candice	Signature of Candidate or Treasurer Candice Owley	Date: Date: Daytime Phone: Email: cowley@wfnhp.org
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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
GAB Ref: 12/050, 11.61, Wis. Stats.

This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984, 608-266-8005.

SCHEDULE 1-A**RECEIPTS
Contributions From Individuals**

Complete Committee Name: WI Nurses/Health Professionals

Date	Full Name	Address	Occupation	Employer Name	Employer Address	Amount	YTD
Total Unitemized Contributions						\$6,484.00	
Total Anonymous Contributions						\$0.00	
Grand Total						\$6,484.00	
Non-Monetary (-):						\$0.00	
Loan Forgiven (-):						\$0.00	
Total						\$6,484.00	

SCHEDULE 1-B**RECEIPTS
Contributions from Committees
(Transfers-In)**

Complete Committee Name: WI Nurses/Health Professionals

Date	Full Name	Address	Amount	YTD
Grand Total			\$0.00	
Non-Monetary (-):			\$0.00	
Total			\$0.00	

SCHEDULE 1-C**RECEIPTS****Other Income and Commercial Loans**

Complete Committee Name: WI Nurses/Health Professionals

Date	Full Name	Address	Amount	YTD
Total			\$0.00	

SCHEDULE 2-A**DISBURSEMENTS
Gross Expenditures**

Complete Committee Name: WI Nurses/Health Professionals

Date	Full Name	Address	Vendor Name	Vendor Address	Expense Purpose	Amount
Monetary						
03/02/2015	Milwaukee County Democratic Party	C/o 1975 South 70th Street, West Allis, WI 53219			Tickets to Events	\$250.00
	Comment(s): Purchase tickets to event					
03/10/2015	Democratic Party of Wisconsin	15 N Pinckney, Suite 200, Madison, WI 53703			Tickets to Events	\$1,500.00
	Comment(s): Purchase tickets for Founders Day Event					
Sub Total						\$1,750.00
Grand Total						\$1,750.00
Non-Monetary (-):						\$0.00
Total						\$1,750.00

SCHEDULE 2-B**DISBURSEMENTS
Contributions To Committees
(Transfers-Out)**

Complete Committee Name: WI Nurses/Health Professionals

Date	Full Name	Address	Vendor Name	Vendor Address	Amount
Monetary					
03/10/2015	Harris	2727 N 67th St, Milwaukee, WI 53210			\$600.00
	Comment(s): Contribution Wendell Harris for Milwaukee School Board				
03/10/2015	State Senate Democratic Comm	PO Box 164, Madison, WI 53701			\$250.00
	Comment(s): Contribution				
03/10/2015	Bradley for Justice	PO Box 1124, Wausau, WI 54402-1124			\$2,500.00
	Comment(s): Contribution				
03/19/2015	Friends of Eddie Cullen	1747 N. 56 Street, Milwaukee, WI 53208			\$400.51
	Comment(s): Contribution Eddie Cullen for Milwaukee County Supervisor District 15				
03/19/2015	Supreme 4 the People	4043 N. 19th Place, Milwaukee, WI 53209			\$394.85
	Comment(s): Contribution Supreme Moore Omokunde for Milwaukee County Supervisor District 10				
Sub Total					\$4,145.36
Grand Total					\$4,145.36
Non-Monetary (-):					\$0.00
Registrant In-Kind Sub Total (-):					\$0.00
Total					\$4,145.36

SCHEDULE 3-A**ADDITIONAL DISCLOSURE**
Incurred Obligations Excluding Loans

Complete Committee Name: WI Nurses/Health Professionals

Beginning Incurred Obligation Amount: \$0.00

Date	Full Name	Address	Amount
Grand Total			\$0.00

Date	Full Name	Amount Paid
Grand Total		\$0.00
Outstanding Incurred Obligations End of Report		\$0.00

SCHEDULE 3-B**ADDITIONAL DISCLOSURE**
Loans
Individual, Committee or Commercial

Complete Committee Name: WI Nurses/Health Professionals

Beginning Loan Balance: \$0.00

Date	Full Name	Address	Amount
Grand Total			\$0.00

Date	Full Name	Amount Paid
Grand Total		\$0.00
Outstanding Loans End of Report		\$0.00