

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

MILWAUKEE COUNTY
ELECTION COMMISSION

Is This Report an Amendment: Yes No

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

2016 MAR 28 A 11: 18

COMMITTEE IDENTIFICATION

Name of Committee

Friends of Eddie Cullen

Street Address

1747 N. 56th St.

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 Pre-Primary Spring Fall Special Termination Report
 July Continuing Pre-Election *2016* also complete Schedule 4
 September Continuing

SUMMARY OF RECEIPTS AND DISBURSEMENTS

Column A
This Period

Column B
Calendar
Year-To-Date

1. RECEIPTS

| | | |
|---|------------------------|------------------------|
| 1A. Contributions (Including Loans) from Individuals | \$ 2,000 ⁰⁰ | \$ 2,000 ⁰⁰ |
| 1B. Contributions from Committees (Transfers-In) | \$ | \$ |
| 1C. Other Income and Commercial Loans | \$ | \$ |
| TOTAL RECEIPTS (Add totals from 1A, 1B and 1C) | \$ 2,000 ⁰⁰ | \$ 2,000 ⁰⁰ |

2. DISBURSEMENTS

| | | |
|--|----|----|
| 2A. Gross Expenditures | \$ | \$ |
| 2B. Contributions to Committees (Transfers-Out) | \$ | \$ |
| TOTAL DISBURSEMENTS (Add totals from 2A and 2B) | \$ | \$ |

CASH SUMMARY

| | |
|---|------------------------|
| Cash Balance Beginning of Report | \$ 698 ¹⁶ |
| Total Receipts | \$ 2,000 ⁰⁰ |
| Subtotal | \$ 2,698 ¹⁶ |
| Total Disbursements | \$ — |
| CASH BALANCE END OF REPORT | \$ 2,698 ¹⁶ |
| INCURRED OBLIGATIONS (Balance at the Close of This Period-3A) | \$ — |
| LOANS (Balance at the Close of This Period-3B) | \$ 5,734 ⁰⁰ |

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 <i>Eddie Cullen</i> | Signature of Candidate or Treasurer <i>Eddie Cullen</i> | Date: <i>3/28/16</i> |
| | Email: <i>Eddie Cullen</i> | Daytime Phone: |

NOTE: The information on this form is required by ss. 11.0204, 11.0304, 11.0404, 11.0504, 11.0604, 11.0804, 11.0904, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.1400, 11.1401, Wis. Stats.

SCHEDULE 1-A

RECEIPTS

Contributions (Including Loans) From Individuals

Complete Committee Name
Friends of Eddie Cullen

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

| Date | Full Name, Mailing Address and Zip Code Of Contributor | Occupation (if year-to-date total exceeds \$200) | Amount of Contribution | Y-T-D Total |
|---------|--|---|---------------------------|-----------------------|
| 3/10/16 | David Cullen 2845 N. 68 th St Milwaukee, WI 53210 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | Milwaukee County Treasurer Courthouse-901 N. 9 th St Milwaukee, WI 53233 | \$1,000 ⁰⁰ | \$1,000 ⁰⁰ |
| 3/10/16 | Julie Cullen 2845 N. 68 th St Milwaukee, WI 53210 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | Educational Assistant Milwaukee College Prep 2623 N. 38 th St Milwaukee, WI 53216 | \$1,000 ⁰⁰ | \$1,000 ⁰⁰ |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | | |

| | | |
|---|------------------------|---------------------|
| SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE | \$ 2,000 ⁰⁰ | 2,000 ⁰⁰ |
| TOTAL ITEMIZED CONTRIBUTIONS | \$ | |
| TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS | \$ | |
| TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS | \$ 2,000 ⁰⁰ | 2,000 ⁰⁰ |

RECEIPTS
Contributions from Committees
(Transfers-In)

Complete Committee Name

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

| Date | Full Name of Committee, Mailing Address and Zip Code | Amount of Contribution |
|--|--|------------------------|
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | |
| SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE | | \$ |
| TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES | | \$ |

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name

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 |
|--|--|---------------------------------|--------|
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE | | | \$ |
| TOTAL ITEMIZED EXPENDITURES | | | \$ |
| TOTAL UNITEMIZED EXPENDITURES | | | \$ |
| TOTAL EXPENDITURES | | | \$ |

DISBURSEMENTS
Contributions To Committees
(Transfers-Out)

Complete Committee Name

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

| Date | Full Name, Mailing Address and Zip Code | Amount | Y-T-D Total |
|--|--|--------|-------------|
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE | | \$ | |
| TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES | | \$ | |

**Loans
Individual, Committee or Commercial
ADDITIONAL DISCLOSURE**

Complete Committee Name
Friends of Eddie Cullen

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

| | | | | | |
|------------------------|---|--|-----------------------------------|---|--|
| Date <u>12/3/14</u> | Full Name, Mailing Address and Zip Code of Loan Source <u>Edward Cullen 2960 N. 61st St Milwaukee, WI 53210</u> | Outstanding Obligations Beginning of This Period <u>\$ 5,734⁰⁰</u> | New Loans This Period <u>-</u> | Cumulative Payments This Period <u>-</u> | Outstanding Obligations End of This Period <u>\$ 5,734⁰⁰</u> |
| | List All Endorsers or Guarantors (if any) | | | | |

| | |
|--|-------------------------------------|
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation |
| | Amount Guaranteed Outstanding \$ |
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation |
| | Amount Guaranteed Outstanding \$ |

| | | | | | |
|--------------------|--|--|-----------------------|---------------------------------|--|
| Date <u>/ /</u> | Full Name, Mailing Address and Zip Code of Loan Source | Outstanding Obligations Beginning of This Period | New Loans This Period | Cumulative Payments This Period | Outstanding Obligations End of This Period |
| | List All Endorsers or Guarantors (if any) | | | | |

| | |
|--|-------------------------------------|
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation |
| | Amount Guaranteed Outstanding \$ |
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation |
| | Amount Guaranteed Outstanding \$ |

| | | | | | |
|--------------------|--|--|-----------------------|---------------------------------|--|
| Date <u>/ /</u> | Full Name, Mailing Address and Zip Code of Loan Source | Outstanding Obligations Beginning of This Period | New Loans This Period | Cumulative Payments This Period | Outstanding Obligations End of This Period |
| | List All Endorsers or Guarantors (if any) | | | | |

| | |
|--|-------------------------------------|
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation |
| | Amount Guaranteed Outstanding \$ |
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation |
| | Amount Guaranteed Outstanding \$ |

| | |
|--------------------------------------|------------------------------|
| SUBTOTAL OUTSTANDING LOANS THIS PAGE | <u>\$ 5,734⁰⁰</u> |
| TOTAL OUTSTANDING LOANS | <u>\$ 5,734⁰⁰</u> |

SCHEDULE 3-A

**Incurred Obligations Excluding Loans
ADDITIONAL DISCLOSURE**

Complete Committee Name

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

| | | Outstanding Balance Beginning This Period | New Obligations or Additions This Period | Cumulative Payments This Period | Outstanding Balance At Close of This Period |
|-------------|---|---|--|---------------------------------|---|
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| | | Nature of Debt (Purpose) | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| | | Nature of Debt (Purpose) | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| | | Nature of Debt (Purpose) | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| | | Nature of Debt (Purpose) | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| | | Nature of Debt (Purpose) | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| | | Nature of Debt (Purpose) | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| | | Nature of Debt (Purpose) | | | |
| | | SUBTOTAL ITEMIZED OBLIGATIONS THIS PAGE | | | |
| | | \$ | | | |
| | | TOTAL ITEMIZED OBLIGATIONS | | | |
| | | \$ | | | |
| | | TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS | | | |
| | | \$ | | | |
| | | TOTAL INCURRED OBLIGATIONS | | | |
| | | \$ | | | |