

**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

2011 FEB -7 P 1:23

RECEIVED

OFFICE USE ONLY

COMMITTEE IDENTIFICATION

Name of Committee

Friends of Cavalier "Cherry" Johnson

Street Address

2716 N. 14th St

City, State and Zip Code

Milwaukee, WI 53206

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 2011 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	\$ 650.00	\$ 650.00
1B. Contributions from Committees (Transfers-In)	\$	\$
1C. Other Income and Commercial Loans	\$	\$
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 650.00	\$ 650.00

2. DISBURSEMENTS

2A. Gross Expenditures	\$ 0.00	\$ 0.00
2B. Contributions to Committees (Transfers-Out)	\$	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 0.00	\$ 0.00

CASH SUMMARY

Cash Balance Beginning of Report	\$ 100.00
Total Receipts	\$ 650.00
Subtotal	\$ 750.00
Total Disbursements	\$ 0.00
CASH BALANCE END OF REPORT	\$ 750.00
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$
LOANS (Balance at the Close of This Period-3B)	\$

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>Cavalier Johnson</i>	Signature of Candidate or Treasurer <i>Cavalier Johnson</i>	Date: 2/7/2011 Daytime Phone:
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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 penalties of ss.11.60, 11.61, Wis. Stats.

GAB-2L (Rev. 12/09) 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 Cavalier "Chevy" Johnson

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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
11/30/10	Cavalier Johnson 2716 N. 14th St Milwaukee, WI 53206	Specialist, MAWZB 2338 N. 27th St Milwaukee, WI 53210	\$100.00	\$100.00
12/23/10	Gerard Randall Milwaukee, WI 532	Chev, MDA 2338 N. 27th St Milwaukee, WI 53210	\$150.00	\$150.00
12/23/10	Gurbjarn Singh	Owner, North Ave. Liquor 3013 W. North Ave Milwaukee, WI 53208	\$200.00	\$200.00
12/23/10	Cavalier Johnson (same as above)	Specialist, MAWZB (same as above)	\$300.00	\$400.00
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SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$750.00

TOTAL ITEMIZED CONTRIBUTIONS

\$

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS

\$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$750.00