

1-1-11 to 6-30-11

Campaign Finance Report

Short Form EB-10a
State Elections Board

W.S.E.B. ID Number

9

Spring Fall Special Pre-Primary _____
 Spring Fall Special Pre-Election _____

Continuing Report due Jan. 31, _____
 Continuing Report due July 20, 2011

MILWAUKEE COUNTY
ELECTION COMMISSION

2011 JUL 12 P 12:51

RECEIVED

Sanfelippo for Supervisor

Name of Conduit (in full)

12024 W Euclid Ave

Address (number and street)

West Allis WI 53227

City, State, Zip

I certify that the above named ^{Committee} ~~conduit~~ did not transfer contributions during the period covered by this report. This report fulfills filing requirements under Sec. 11.06(9), Stats. *Contributions or disbursements*

Signature of Conduit Administrator

Mary M. ...

Date

7.9.11

Daytime Phone

414-852-2230

EB-10a (Rev. 11/03) (Reformatted 11/03) (Y2K 9/99)

**CAMPAIGN FINANCE REPORT
STATE OF WISCONSIN**

Is this report an Amendment? YES **NO**

COMMITTEE IDENTIFICATION

Name of Committee Sanfelippo for Supervisor

Address 12024 W Euclid Ave

City, State, ZIP West Allis, WI 53227

OFFICE USE ONLY

WSEB # ID

Please check if address is different than previously reported

NAME OF REPORT Jan 2010 Continuing Pre-Primary 2010 Spring Fall Special
 X July 2010 Continuing Pre-election 2010 Spring Fall Special

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

	Column A This Period	Column B YTD	Audited Totals Office Use Only	
A. Contributions including Loans from Individuals	\$ -	\$ -		
B. Contributions from Committees (Transfers-In)	\$ -			
C. Other Income and Commercial Loans	\$ -			
TOTAL RECEIPTS (Add totals from 1A, 1B, and 1C)	\$ -	\$ -		

1. DISBURSEMENTS

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

CASH SUMMARY

Cash Balance at Beginning of Report	\$ 2,481.23
Total Receipts	
Subtotal	\$ 2,481.23
Total Disbursements	\$ -
CASH BALANCE AT END OF REPORT	\$ 2,481.23
INCURRED OBLIGATIONS (at close of period)	\$ -
LOANS (at close of period)	\$ 15,100.00

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

Mary Maierle
Treasurer

Signature of Candidate or Treasurer



Date

7/9/2011

Daytime Phone

414-852-2230

NOTE: The information on this form is required by ss. 11.06, 11.20, Wis. Stats.

Failure to provide this information may subject you to the penalties of ss. 11.60, 11.62, Wisconsin Stats.