

**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

2012 JUL 12 P 12:15

RECEIVED *JEW*

OFFICE USE ONLY

**COMMITTEE IDENTIFICATION**

Name of Committee

*Bunting for Comptroller*

Street Address

*4020 S. 76<sup>th</sup> St.*

City, State and Zip Code

*Milwaukee, WI 53220*

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 *2012*     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	\$ <i>769.00</i>	\$ <i>3484.50</i>
1B. Contributions from Committees (Transfers-In)	\$ <i>0.00</i>	\$ <i>250.00</i>
1C. Other Income and Commercial Loans	\$ <i>0.00</i>	\$ <i>0.00</i>
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)	\$ <i>769.00</i>	\$ <i>3734.50</i>

**2. DISBURSEMENTS**

2A. Gross Expenditures	\$ <i>1850.11</i>	\$ <i>3884.29</i>
2B. Contributions to Committees (Transfers-Out)	\$ <i>0</i>	\$ <i>0</i>
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	\$ <i>1850.11</i>	\$ <i>3884.29</i>

**CASH SUMMARY**

Cash Balance Beginning of Report	\$ <i>1081.11</i>
Total Receipts	\$ <i>769.00</i>
Subtotal	\$ <i>1850.11</i>
Total Disbursements	\$ <i>1850.11</i>
<b>CASH BALANCE END OF REPORT</b>	\$ <i>0</i>
<b>INCURRED OBLIGATIONS</b> (Balance at the Close of This Period-3A)	\$ <i>0</i>
<b>LOANS</b> (Balance at the Close of This Period-3B)	\$ <i>0</i>

*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

*Kristie Bunting*

Signature of Candidate or Treasurer

*Kristie Bunting*

Date: *7/10/12*

Daytime Phone: *(414) 4124744*

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.

**RECEIPTS**  
**Contributions (Including Loans) From Individuals**

Complete Committee Name  
Bunting for Comptroller

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
3/25/12	Steven Kraeger 4975 S. 15th Pl Milw, WI 53221	Owner - Steven Kraeger Trucking 4975 S. 15th Pl Milw, WI 53221	50.00	75.00
3/30/12	Richard Bunting 117 Longfellow Rd Jamestown, RI	Naval Officer US Navy	300.00	300.00
4/2/12	Kristie Bunting 4020 S. 76th St. Milw, WI 53220	Procorp Ent. 10200 Innovation Dr. Milw, WI 53226	300.00	720.00
3/30/12	Deanna Limney 2522 S. 70th St Milw, WI 53219	Exec Admin - Rockwell 1201 S. 2nd Milw, WI 53204	13.00	113.00
3/28/12	Derek Bunting 4020 S. 76th St. Milw, WI 53220	Faust Co. 401 N. W 3rd Milw, WI	100.00	
/ /				
/ /				
/ /				

**SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE** \$ 763.00

**TOTAL ITEMIZED CONTRIBUTIONS** \$ 763.00

**TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS** \$ 6.00

**TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS** \$ 769.00

**DISBURSEMENTS**  
Gross Expenditures

Complete Committee Name  
Bunting for Comptroller

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
3/22/12	Office Max 10707 W. Cleveland West Allis WI 53227 Check if: <input type="checkbox"/> In-Kind Offset	Additional paper & glycer supplies	29.43
3/28/12	Clear Channel 12100 W. Howard Greenfield, WI 53228 Check if: <input type="checkbox"/> In-Kind Offset	Radio commercial timeslots	598.50
3/29/12	Aristotle 205 Pennsylvania Ave Washington DC 20003 Check if: <input type="checkbox"/> In-Kind Offset	Voter phone list	45.87
3/30/12	PMI Inc PO Box 698 Mandarin FL 32447 Check if: <input type="checkbox"/> In-Kind Offset	Robocalls	295.77
3/26/12	Deek Bunting 4020 S. 7th Milw, WI 53220 Check if: <input checked="" type="checkbox"/> In-Kind Offset	Recording of radio commercial.	100.00
3/30/12	Facebook CA Check if: <input type="checkbox"/> In-Kind Offset	Facebook advertising	41.57
3/31/12	Facebook CA Check if: <input type="checkbox"/> In-Kind Offset	Facebook advertising	50.00
4/1/12	Facebook CA Check if: <input type="checkbox"/> In-Kind Offset	Facebook advertising	56.33
4/2/12	Facebook CA Check if: <input type="checkbox"/> In-Kind Offset	Facebook advertising	60.00

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE \$ 1277.47

TOTAL ITEMIZED EXPENDITURES \$ 1850.11

TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS \$ 0

TOTAL EXPENDITURES \$ 1850.11

**SCHEDULE 2-A**

**DISBURSEMENTS  
Gross Expenditures**

Complete Committee Name  
Bunting for Comptroller

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
4/3/12	Facebook CA Check if: <input type="checkbox"/> In-Kind Offset	Facebook advertising	37.28
4/3/12	Club Paragon 3378 S. 100th Milw WI 53228 Check if: <input type="checkbox"/> In-Kind Offset	Election night event	144.69
3/30/12	DonorTown Square 1875 Clay Dr Crozet VA 22932 Check if: <input type="checkbox"/> In-Kind Offset	Credit card processing fees	20.85
4/12/12	Me1 Bank 3155 N. 124th St Brookfield WI 53005 Check if: <input type="checkbox"/> In-Kind Offset	Activity fee	4.00
4/24/12	Kristie Bunting 4020 S. 76th St Milw WI 53220 Check if: <input type="checkbox"/> In-Kind Offset	Repayment of loan	365.82
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE \$ 572.64

TOTAL ITEMIZED EXPENDITURES \$ 1850.11

TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS \$ 0

TOTAL EXPENDITURES \$ 1850.11

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

Complete Committee Name  
*Bunting for Comptroller*

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

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Balance Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Balance End of This Period
/ /	<i>Kristie Bunting 4020 S. 76th St. Milw, WI 53220</i>	<i>400.00</i>	<i>300.00</i>	<i>365.82</i>	<i>Ø</i>

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation <i>Candidate</i>
	Name and Address of Employer <i>4020 S. 76th St. Milw WI 53220</i>
	Amount Guaranteed Outstanding \$ <i>0.00 - Loan forgiven</i>
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Name and Address of Employer
	Amount Guaranteed Outstanding \$

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Balance Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Balance End of This Period
/ /					

List All Endorsers or Guarantors (if any)

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

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Balance Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Balance End of This Period
/ /					

List All Endorsers or Guarantors (if any)

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

<b>SUBTOTAL OUTSTANDING LOANS THIS PAGE</b>	\$
<b>TOTAL OUTSTANDING LOANS</b>	\$

**SCHEDULE 4**

**TERMINATION REQUEST**

Complete Committee Name  
*Bunting for Comptroller*

- A committee may terminate its registration and reporting requirements if the committee will no longer receive contributions, make disbursements or incur obligations, and the cash balance and obligations have been reduced to zero.
- Candidates may not terminate prior to the election in which they are participating.
- Please read carefully and, if necessary, indicate how residual committee funds have been disposed of or if outstanding loans or obligations have been forgiven. Sign and date the termination request at the bottom of this page.
- Make sure the termination box on the cover page of this report is checked.
- Please note: An audit must be completed and all obligations with the Board, including settlement offers, fulfilled before termination can be granted. All records must be maintained until termination is granted.

**DISPOSAL OF RESIDUAL FUNDS**  
*THIS INFORMATION SHOULD ALSO BE INCLUDED ON SCHEDULE 2-A AND OR 2-B.*

Date	Recipient	Amount

**LOAN OR DEBT FORGIVENESS**  
*I hereby forgive all personal loans or have assumed responsibility for any and all debts of my campaign committee.*

Date	Endorser, Guarantor, or Creditor	Amount
4/24/12	<i>Kristie Bunting</i>	334.18

TERMINATION REQUEST. I hereby request that the committee registration be terminated. I declare that the committee has not incurred any obligations and does not anticipate incurring any. The committee does not anticipate receiving any further contributions or making any disbursements. I further state that the cash balance has been reduced to zero and that all remaining funds have been disposed of in the manner prescribed by law.

*Kristie A. Bunting*  
 \_\_\_\_\_  
 Signature of Candidate or Treasurer

*7/10/12*  
 \_\_\_\_\_  
 Date