

**CAMPAIGN FINANCE REPORT
STATE OF WISCONSIN**

1-1-10 to 6-30-10

MILWAUKEE COUNTY
ELECTION COMMISSION

Is This Report an Amendment: Yes No

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

2010 JUL 16 PM 12:59

RECEIVED
OFFICE USE ONLY

COMMITTEE IDENTIFICATION

Name of Committee
FRIENDS OF SUPERVISOR RICHARD H. BUSSLER

Street Address
2207 No. 65th St.

City, State and Zip Code
WAUWATOSA, WI 53213

WSEB ID Number:

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 *2010* 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 | Audited Totals Office Use Only | |
|--|-------------------------|--------------------------------------|-----------------------------------|------------------|
| 1. RECEIPTS | | | | |
| 1A. Contributions (Including Loans) from Individuals | \$ | \$ | \$ | \$ |
| 1B. Contributions from Committees (Transfers-In) | \$ | \$ | \$ | \$ |
| 1C. Other Income and Commercial Loans | \$ <i>9.58</i> | \$ <i>9.58</i> | \$ <i>9.58</i> | \$ <i>9.58</i> |
| TOTAL RECEIPTS (Add totals from 1A, 1B and 1C) | \$ <i>9.58</i> | \$ <i>9.58</i> | \$ <i>9.58</i> | \$ <i>9.58</i> |
| 2. DISBURSEMENTS | | | | |
| 2A. Gross Expenditures | \$ <i>100.00</i> | \$ <i>100.00</i> | \$ - | \$ - |
| 2B. Contributions to Committees (Transfers-Out) | \$ | \$ | \$ <i>100.00</i> | \$ <i>100.00</i> |
| TOTAL DISBURSEMENTS (Add totals from 2A and 2B) | \$ <i>100.00</i> | \$ <i>100.00</i> | \$ <i>100.00</i> | \$ <i>100.00</i> |

CASH SUMMARY

| | | |
|--|--------------------|--------------------|
| Cash Balance Beginning of Report | \$ <i>19445.25</i> | \$ <i>19445.25</i> |
| Total Receipts | \$ <i>9.58</i> | \$ <i>9.58</i> |
| Subtotal | \$ | \$ <i>19454.83</i> |
| Total Disbursements | \$ <i>100.00</i> | \$ <i>100.00</i> |
| CASH BALANCE END OF REPORT | \$ <i>19354.83</i> | \$ <i>19354.83</i> |
| INCURRED OBLIGATIONS (Balance at the Close of This Period-3A) | \$ | \$ |
| LOANS (Balance at the Close of This Period-3B) | \$ | \$ |

\$25.00 off from bank statement

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>RICHARD H. BUSSLER</i> | Signature of Candidate or Treasurer <i>[Signature]</i> | Date: <i>7/14/10</i> |
| | | Daytime Phone: <i>(414) 771-6638</i> |

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.

Complete Committee Name
FRIENDS OF SUP. RICHARD H. BUSSLER

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

| Date | Full Name, Mailing Address and Zip Code of Source of Income | Type of Income | Amount | Office Use |
|--|---|--------------------|---------|------------|
| 11110 TO 6/30/10 | FOCUS CREDIT UNION 1530 NO. 68 TH ST. WAUWATOSA WI 53213 | EARNED INTEREST | 9.58 | |
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| SUBTOTAL OTHER INCOME THIS PAGE | | | \$ 9.58 | |
| TOTAL ITEMIZED OTHER INCOME | | | \$ | |
| TOTAL UNITEMIZED OTHER INCOME \$20 OR LESS | | | \$ | |
| TOTAL OTHER INCOME | | | \$ 9.58 | |

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name
FRIENDS OF SUP. RICHARD H. BUSSLER

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 | Office Use |
|--|---|--|-----------|------------|
| 2/15/10 | JOHN SANDVIK FOR ALDERMAN 2144 NO. 62ND ST. WAUKATOSA WI 53213 Check if: <input type="checkbox"/> In-Kind Offset | ALDERMAN'S CAMPAIGN CONTRIBUTION | 100.00 | |
| / / | 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 | Office Use |
| / / | 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 | Office Use |
| / / | 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 | Office Use |
| / / | 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 | Office Use |
| / / | 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 | Office Use |
| / / | 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 | Office Use |
| / / | 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 | Office Use |
| / / | 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 | Office Use |
| SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE | | | \$ 100.00 | |
| TOTAL ITEMIZED EXPENDITURES | | | \$ 100.00 | |
| TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS | | | \$ | |
| TOTAL EXPENDITURES | | | \$ 100.00 | |