

**CAMPAIGN FINANCE REPORT  
LOCAL COMMITTEES OF WISCONSIN**

MILWAUKEE COUNTY  
ELECTION COMMISSION

Is This Report an Amendment:     Yes     No

2012 FEB 13 P 2:47

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

**COMMITTEE IDENTIFICATION**

Name of Committee  
**FRIENDS OF AT BUFORD**

Street Address  
**6947 N. 84<sup>th</sup> STREET**

City, State and Zip Code  
**MILWAUKEE, WI 53224**

**RECEIVED**  
*JFW*

**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 **2012**     Spring     Fall     Special  
 July Continuing     Pre-Election     Spring     Fall     Special

Termination Report  
also complete Schedule 4

<b>SUMMARY OF RECEIPTS AND DISBURSEMENTS</b>	Column A This Period	Column B Calendar Year-To-Date
<b>1. RECEIPTS</b>		
1A. Contributions (Including Loans) from Individuals	\$ 1236.16	\$ 1336.16
1B. Contributions from Committees (Transfers-In)	\$	\$
1C. Other Income and Commercial Loans	\$	\$
<b>TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)</b>	<b>\$ 1236.16</b>	<b>\$ 1336.16</b>
<b>2. DISBURSEMENTS</b>		
2A. Gross Expenditures	\$ 891.16	\$ 891.16
2B. Contributions to Committees (Transfers-Out)	\$	\$
<b>TOTAL DISBURSEMENTS (Add totals from 2A and 2B)</b>	<b>\$ 891.16</b>	<b>\$ 891.16</b>

**CASH SUMMARY**

Cash Balance Beginning of Report	\$ 100
Total Receipts	\$ 1236.16
Subtotal	\$ 1336.16
Total Disbursements	\$ 891.16
<b>CASH BALANCE END OF REPORT</b>	<b>\$ 445.00</b>
<b>INCURRED OBLIGATIONS</b> (Balance at the Close of This Period-3A)	\$
<b>LOANS</b> (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 <b>NICOLE M. BROOKSHIRE/TREASURER</b>	Signature of Candidate or Treasurer <i>Nicole M. Brookshire</i>	Date: <b>02.13.12</b>
		Daytime Phone: <b>414.839.6034</b>

**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.

Complete Committee Name  
**FRIENDS OF A T BUFORD**

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
12/21/11	ADDBOLIA T. BUFORD 6947 N. 84 <sup>th</sup> STREET MILW WI 53224	JAG PROGRAM SPEC MILW URBAN LEAGUE 435 W. NORTH AE MILW WI 53212	\$ 100.00	\$ 100.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
02/01/12	DEWAYNE MAY 2702 N. 50 <sup>th</sup> STREET MILW WI 53210		\$ 25.00	\$ 25.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
02/01/12	WILMER C. BUFORD 5043 N. 41 <sup>st</sup> STREET MILW WI 53209		\$ 25.00	\$ 25.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
02/01/12	CHRISTOPHER TEASLEY 6947 N. 84 <sup>th</sup> ST MILW WI 53224		\$ 50.00	\$ 50.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
02/01/12	FOSTER HAMPTON W148 N10279 WINDSONG CIRCLE GERMANTOWN WI 53022	PRODUCT BUSINESS MANAGER STRATTEC SECURITY CORP. 3333 W. GOOD HOPE RD MILW WI 53209	\$ 383.80	\$ 383.80
	Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
02/01/12	NADINE SMITH 4027 N. 86 <sup>th</sup> STREET MILW WI 53222	RETIRED	\$ 46.32	\$ 46.32
	Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
02/01/12	DONALD BUFORD 2504 PLUMDALE DRIVE CARROLLTON TX 75006	PILOT SOUTHWEST AIRLINES 3200 E. AIRFIELD DRIVE DALLAS TX 75261	\$ 264.00	\$ 264.00
	Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
02/01/12	MARY EVELL 2837 N. RICHARDS STREET MILW WI 53212	RETIRED	\$ 97.04	\$ 97.04
	Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 991.16
TOTAL ITEMIZED CONTRIBUTIONS	\$ —
TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS	\$ —
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$ —

See page 2 OF 2

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

Complete Committee Name  
**FRIENDS OF A T BUFORD**

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
02/01/12	<b>PINKEY BUFORD</b> 4146 N. 63rd STREET MILW WI 53216	<b>EMPLOYMENT SPECIALIST</b> MILW URBAN LEAGUE 435 W. NORTH AVE MILW WI 53212	\$100.00	\$100.00
02/01/12	<b>LARRY STEPHENS</b> 3254 N. 52nd ST MILW WI 53216		\$25.00	\$25.00
02/01/12	<b>NATOSHIA D. HARRIS</b> 2707 N. 67th STREET MILW WI 53210		\$75.00	\$75.00
02/01/12	<b>JULIUS J HULBERT</b> 3819 N. 98th BVD MILW WI 53216		\$30.00	\$30.00
02/01/12	<b>FOSTER HAMPTON</b> W148 N10279 WINDSONG CIRLE GERMANTOWN WI 53022	<b>PRODUCT MANAGER</b> STRATEG SECURITY CORP 3333 W. GOODHOPE RD MILW WI 53209	\$25.00	\$408.80
02/01/12	<b>NADINE SMITH</b> 4027 N. 86th ST MILW WI 53222	<b>RETIRED</b>	\$20.00	\$66.32
1 1				
02/01/12	<b>TOTAL UNITEMIZED</b>		\$70.00	\$70.00

<b>SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE</b>	\$ 275.00
<b>TOTAL ITEMIZED CONTRIBUTIONS</b>	\$ 1266.16
<b>TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS</b>	\$ 70.00
<b>TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS</b>	\$ 1336.16

**DISBURSEMENTS**  
Gross Expenditures

Complete Committee Name  
**FRIENDS OF A T BUFORD**

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
02/01/12	ARJ'S PANACHE LOUNGE 4034 W. GOODHOPE RD MILW WI 53209 Check if: <input checked="" type="checkbox"/> In-Kind Offset	FUNDRAISER EVENT LOCATION	\$ 100.00
02/01/12	LENAS FOOD MARKET 4030 N. TURTLE CREEK MILW WI 53209 Check if: <input checked="" type="checkbox"/> In-Kind Offset	FUNDRAISER FOOD	\$ 119.80
01/31/12	UNION COPY CENTERS INC 3060 S. 43RD STREET MILW WI 53219 Check if: <input checked="" type="checkbox"/> In-Kind Offset	CAMPAIGN LITERATURE	\$ 528.00
02/01/12	DOLLAR TREE STORES INC 320 E. CAPITOL DR MILW WI 53212 Check if: <input checked="" type="checkbox"/> In-Kind Offset	FUNDRAISER NAPKINS/UTENSILS	\$ 22.18
01/31/12	SAM'S CLUB 7701 W. CALUMET RD MILW WI 53223 Check if: <input checked="" type="checkbox"/> In-Kind Offset	FUNDRAISER FOOD	\$ 71.91
02/01/12	WALGREEN'S 370 E. CAPITOL DR MILW WI 53212 Check if: <input checked="" type="checkbox"/> In-Kind Offset	FUNDRAISER DECORATIONS	\$ 2.95
02/01/12	SAM'S CLUB 7701 W. CALUMET RD MILW WI 53223 Check if: <input checked="" type="checkbox"/> In-Kind Offset	FUNDRAISER FOOD	\$ 46.32
/ /	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 \$ 891.16

TOTAL ITEMIZED EXPENDITURES \$ 891.16

TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS \$ -

TOTAL EXPENDITURES \$ 891.16