

**CAMPAIGN FINANCE REPORT  
STATE OF WISCONSIN**

1-1-12 to 2-6-12

Is This Report an Amendment:  Yes  No

MILWAUKEE COUNTY  
ELECTION COMMISSION

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

**COMMITTEE IDENTIFICATION**

2012 FEB 13 P 2:47

Name of Committee

Friends of Steve F. Taylor

RECEIVED  
OFFICE USE ONLY

Street Address

2812 W Hilltop Lane

City, State and Zip Code

Franklin WI 53122

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 12  Spring  Fall  Special  
 July Continuing  Pre-Election  Spring  Fall  Special

Termination Report  
also complete Schedule 4

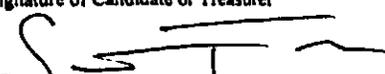
**SUMMARY OF RECEIPTS AND DISBURSEMENTS**

	Column A This Period	Column B Calendar Year-To-Date	Audited Totals Office Use Only	
<b>1. RECEIPTS</b>				
1A. Contributions (Including Loans) from Individuals	\$ 3150.00	\$ 3150.00	\$	\$
1B. Contributions from Committees (Transfers-In)	\$ 0	\$ 0	\$	\$
1C. Other Income and Commercial Loans	\$ 0	\$ 0	\$	\$
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)	\$ 3150	\$ 3150	\$	\$
<b>2. DISBURSEMENTS</b>				
2A. Gross Expenditures	\$ 1686.92	\$ 1686.92	\$	\$
2B. Contributions to Committees (Transfers-Out)	\$ 0	\$ 0	\$	\$
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	\$ 1686.92	\$ 1686.92	\$	\$

**CASH SUMMARY**

Cash Balance Beginning of Report	\$ 0	\$
Total Receipts	\$ 3150	\$
Subtotal	\$ 3150	\$
Total Disbursements	\$ 1686.92	\$
<b>CASH BALANCE END OF REPORT</b>	\$ 1463.08	\$
<b>INCURRED OBLIGATIONS</b> (Balance at the Close of This Period-3A)	\$ 1610.40	\$
<b>LOANS</b> (Balance at the Close of This Period-3B)	\$ 3000	\$

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	Signature of Candidate or Treasurer	Date:
Steve F. Taylor		2-13-12
		Daytime Phone: 414-759-4086

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.

This form is prescribed by the State Elections Board P.O. Box 2973, Madison, WI 53701-2973, 608-266-8005 Fax:608-267-0500

RECEIPTS  
Contributions (Including Loans) From Individuals

Complete Committee Name  
Friends of Steve F. Taylor

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
1/9/12	Tom Gadowski, 3472 W Oakwood Rd Franklin, WI 53132	Retired	100.00	100.00 Office Use
1/10/12	Rose Spang 8012 S 68th St Franklin, WI 53132		50.00	50.00 Office Use
1/9/12	Steve Taylor 2812 W Hilltop Ln Franklin, WI 53132	Country Financial 7200 Washington Ave Racine, WI 53406 Financial Rep	3000	3000 Office Use
1/1				
1/1				
1/1				
1/1				
1/1				

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$3150

TOTAL ITEMIZED CONTRIBUTIONS

\$ 0

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS

\$ 0

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$3150

**DISBURSEMENTS**  
Gross Expenditures

Complete Committee Name  
Friends of Steve F. Taylor

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
1/13/12	Political Lawn Signs 916 Byrd Ave Newport, VT 54956 Check if: <input checked="" type="checkbox"/> In-Kind Offset	18"x24" Yard Signs	600.86	
1/14/12	Prime Printing Signs 10807 W Orange, Suite 1 Hales Corners, WI 53130 Check if: <input checked="" type="checkbox"/> In-Kind Offset	4'x4" Yard Signs	1066.56	
1/24/12	North Shore Bank 7151 57th Franklin, WI 53132 Check if: <input checked="" type="checkbox"/> In-Kind Offset	Checks	19.50	
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made  Check if: <input checked="" 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 checked="" 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 checked="" 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	\$ 1686.92	
TOTAL ITEMIZED EXPENDITURES	\$ 0	
TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS	\$ 0	
TOTAL EXPENDITURES	\$ 1686.92	

**SCHEDULE 3-A**

**ADDITIONAL DISCLOSURE  
Incurred Obligations Excluding Loans**

Complete Committee Name  
*Friends of Steve F. Taylor*

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

		Outstanding Balance Beginning This Period	New Obligations or Additions This Period	Cumulative Payments This Period	Outstanding Balance At Close of This Period	Office Use Only
Date	Full Name, Mailing Address and Zip Code of Creditor					
<i>2/3/12</i>	<i>Minuteman Press So 76 4149 S 76th St Milwaukee, WI 53132</i>	<i>0</i>	<i>1610.40</i>	<i>0</i>	<i>1610.40</i>	
		Nature of Debt (Purpose)				
		<i>Campaign Literature</i>				
Date	Full Name, Mailing Address and Zip Code of Creditor					
<i>1 / 1</i>						
		Nature of Debt (Purpose)				
Date	Full Name, Mailing Address and Zip Code of Creditor					
<i>1 / 1</i>						
		Nature of Debt (Purpose)				
Date	Full Name, Mailing Address and Zip Code of Creditor					
<i>1 / 1</i>						
		Nature of Debt (Purpose)				
Date	Full Name, Mailing Address and Zip Code of Creditor					
<i>1 / 1</i>						
		Nature of Debt (Purpose)				
Date	Full Name, Mailing Address and Zip Code of Creditor					
<i>1 / 1</i>						
		Nature of Debt (Purpose)				
Date	Full Name, Mailing Address and Zip Code of Creditor					
<i>1 / 1</i>						
		Nature of Debt (Purpose)				
SUBTOTAL ITEMIZED OBLIGATIONS THIS PAGE					<i>\$ 1610.40</i>	
TOTAL ITEMIZED OBLIGATIONS					<i>\$ 1610.40</i>	
TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS					<i>\$ 0</i>	
TOTAL INCURRED OBLIGATIONS					<i>\$ 1610.40</i>	

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

Complete Committee Name  
 Friends of Steve F. Taylor

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
1/19/12	Steve Taylor 2812 W Hilltop Ln Franklin, NJ 08832	0	3,000	0	3,000

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 \$

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 \$

SUBTOTAL OUTSTANDING LOANS THIS PAGE	\$
TOTAL OUTSTANDING LOANS	\$