

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

7-1-12 to 12-31-12

Is This Report an Amendment: Yes No

MILWAUKEE COUNTY
ELECTION COMMISSION

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

2013 JAN 28 P 12:07

COMMITTEE IDENTIFICATION

Name of Committee

Friends of David Cullen

Street Address

2845 N. 68th St.

City, State and Zip Code

Milwaukee, WI 53210

RECEIVED

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 2013 Pre-Primary _____ Spring Fall Special
- July Continuing _____ 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	\$ —	\$ —
1B. Contributions from Committees (Transfers-In)	\$ —	\$ —
1C. Other Income and Commercial Loans	\$ —	\$ —
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 0	\$ 0

2. DISBURSEMENTS

2A. Gross Expenditures	\$ 119 ²⁰	\$ 119 ²⁰
2B. Contributions to Committees (Transfers-Out)	\$ 100 ⁰⁰	\$ 100 ⁰⁰
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 219.20	\$

CASH SUMMARY

Cash Balance Beginning of Report	\$ 42,308.17
Total Receipts	\$ —
Subtotal	\$ 42,308.17
Total Disbursements	\$ 219.20
CASH BALANCE END OF REPORT	\$ 42,088.97
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ —
LOANS (Balance at the Close of This Period-3B)	\$ 20,400.00

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 David A. Cullen	Signature of Candidate or Treasurer <i>David A. Cullen</i>	Date: 1/28/13 Daytime Phone: 414-278-4263
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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.

**DISBURSEMENTS
Gross Expenditures**

Complete Committee Name
Friends of David Cullen

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
9/10/12	Best Buy 2401 N. Mayfair Rd Wauwatosa, WI 53226 Check if: <input type="checkbox"/> In-Kind Offset	cell phone	32.06
9/19/12	Best Buy 2401 N. Mayfair Rd Wauwatosa WI Check if: <input type="checkbox"/> In-Kind Offset		31.68
10/15/12	United States Post Office 5500 W. Center St Milwaukee WI 53210 Check if: <input type="checkbox"/> In-Kind Offset	postage stamps	23.40
10/21/12	Best Buy 2401 N. Mayfair Rd Wauwatosa, WI 53226 Check if: <input type="checkbox"/> In-Kind Offset	cell phone	32.06
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SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE \$ *119.20*

TOTAL ITEMIZED EXPENDITURES \$

TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS \$

TOTAL EXPENDITURES \$ *119.20*

DISBURSEMENTS
Contributions To Committees
(Transfers-Out)

Complete Committee Name
Friends of David Cullen

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

Date	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
10/9/12	<i>Friends of Ryan Schroeder</i> <i>510 S. 7th St</i> <i>Delavan WI 53115</i> Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	\$ 100 ⁰⁰	\$ 100 ⁰⁰
/ /	Full Name, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
/ /	Full Name, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
/ /	Full Name, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
/ /	Full Name, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
/ /	Full Name, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
/ /	Full Name, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
/ /	Full Name, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
/ /	Full Name, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE		\$ 100 ⁰⁰	
TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES		\$ 100 ⁰⁰	

ADDITIONAL DISCLOSURE
Loans
Individual, Committee or Commercial

Complete Committee Name
Friends of David Cullen

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
12/31/92	David Cullen 2845 N. 68 th St Milwaukee, WI 53210	\$ 1,400 ⁰⁰	—	—	\$ 1,400 ⁰⁰

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
2/19/93	David Cullen 2845 N. 68 th St Milwaukee WI 53210	\$ 8,000 ⁰⁰	—	—	\$ 8,000 ⁰⁰

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
6/28/94	David Cullen 2845 N. 68 th St Milwaukee, WI 53210	\$ 11,000 ⁰⁰	—	—	\$ 11,000 ⁰⁰

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	\$ 20,400 ⁰⁰
TOTAL OUTSTANDING LOANS	\$ 20,400 ⁰⁰