

**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 30 P 12:56

COMMITTEE IDENTIFICATION

Name of Committee

FRIENDS OF CHRIS MOEWS

Street Address

8890 GREENVIEW LANE

City, State and Zip Code

GREENDALE, WI 53129

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 | \$ 4001 ⁰⁰ | \$ 4001 ⁰⁰ |
| 1B. Contributions from Committees (Transfers-In) | \$ 0 | \$ 0 |
| 1C. Other Income and Commercial Loans | \$ 0 | \$ 0 |
| TOTAL RECEIPTS (Add totals from 1A, 1B and 1C) | \$ 4001 ⁰⁰ | \$ 4001 ⁰⁰ |

2. DISBURSEMENTS

| | | |
|--------------------------------------------------------|----------------------|----------------------|
| 2A. Gross Expenditures | \$ 996 ⁰³ | \$ 996 ⁰³ |
| 2B. Contributions to Committees (Transfers-Out) | \$ 0 | \$ 0 |
| TOTAL DISBURSEMENTS (Add totals from 2A and 2B) | \$ 996 ⁰³ | \$ 996 ⁰³ |

CASH SUMMARY

| | |
|-------------------------------------------------------------------------|-----------------------|
| Cash Balance Beginning of Report | \$ 3414 ⁴¹ |
| Total Receipts | \$ 4001 ⁰⁰ |
| Subtotal | \$ 7415 ⁴¹ |
| Total Disbursements | \$ 996 ⁰³ |
| CASH BALANCE END OF REPORT | \$ 6419 ³⁸ |
| INCURRED OBLIGATIONS (Balance at the Close of This Period-3A) | \$ 0 |
| LOANS (Balance at the Close of This Period-3B) | \$ 0 |

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: 01-29-13

VICKIE M. STRACHOTA

Vickie M. Strachota

Daytime Phone: 414-333-6573

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
FRIENDS OF CHRIS MOEWS

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 |
|-----------------------------------------------|------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------|-----------------------------|
| 08/25/12 | SCHOOPS, KEVIN 3675 RIVERSIDE DR #8 GREENFIELD, WI 53228 | CORRECTIONS OFFICER HOUSE OF CORRECTION 8885 S. 68 ST. FRANKLIN, WI | \$100 ⁰⁰ | \$250 ⁰⁰ |
| 08/25/12 | FABIAN, JAMES 3540 S. 111 ST. GREENFIELD, WI | MAINTENANCE HOUSE OF CORRECTION 8885 S. 68 ST FRANKLIN, WI | \$50 ⁰⁰ | \$50 ⁰⁰ |
| 08/28/12 | LARSON, CHRIS 3261 S. HERMAN ST MILWAUKEE, WI 53207 | WI STATE SENATOR P.O. BOX 7882 MADISON, WI 53707 | \$100 ⁰⁰ | \$100 ⁰⁰ |
| 09/19/12 | BOUSHON, RUSS 7327 W. MORGAN AVE MILWAUKEE, WI 53220 | DEPUTY SHERIFF MILW COUNTY SHERIFF 821 W. STATE ST MILWAUKEE, WI 53233 | \$500 ⁰⁰ | \$500 ⁰⁰ |
| 09/27/12 | LOVE, MARTHA 1846 W. CHERRY ST MILWAUKEE WI 53205 | ADMINISTRATOR MARTHA LOVE ASSOC LLC 1846 W. CHERRY ST MILWAUKEE, WI 53205 | \$100 ⁰⁰ | \$100 ⁰⁰ |
| 10/01/12 | SMITH, JUDY 3044 S. 55 ST MILWAUKEE, WI 53219 | UNKNOWN | \$25 ⁰⁰ | \$25 ⁰⁰ |
| 10/02/12 | LIEGEL, CHRISTOPHER 2501 E. MENLO BLVD SHOREWOOD, WI 53211 | ATTORNEY MILWAUKEE COUNTY 821 W. STATE ST MILWAUKEE, WI 53233 | \$100 ⁰⁰ | \$100 ⁰⁰ |
| 10/02/12 | WEISHAN, JOHN 2605 S 82ND ST WESTALLIS, WI 53219 | SUPERVISOR DIST #16 MILWAUKEE COUNTY 901 N. 9TH ST MILWAUKEE, WI 53233 | \$100 ⁰⁰ | \$100 ⁰⁰ |
| SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE | | | \$1075 ⁰⁰ | |
| TOTAL ITEMIZED CONTRIBUTIONS | | | \$1075 ⁰⁰ | |
| TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS | | | \$10 ⁰⁰ | |
| TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS | | | \$1085 ⁰⁰ | |

Contributions (Including Loans) From Individuals

Complete Committee Name
FRIENDS of CHRIS MOEWS

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 |
|-----------------------------------------------|---------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------|-----------------------------------|
| 10/02/12 | ZIZZO, GRACIA 1060 LONETREE RD ELM GROVE, WI 53122 | UNKNOWN | \$50 ⁰⁰ | \$50 ⁰⁰ Office Use |
| 10/02/12 | GANIERE, EUGENE CATHERINE 936 WALDSPOGENESSEL WALKESHA, WI | RETIRED | \$100 ⁰⁰ | \$100 ⁰⁰ Office Use |
| 10/02/12 | HYNES, JOSEPH W264 N2377 FAUNCE PEWAUKEE, WI 53072 | RETIRED | \$50 ⁰⁰ | \$50 ⁰⁰ Office Use |
| 10/02/12 | ORVIS, SHANNON 7930 W O CONNER ST MILWAUKEE, WI 53214 | POLICE OFFICER CITY OF MILWAUKEE 749 W. STATE ST MILWAUKEE, WI 53238 | \$200 ⁰⁰ | \$200 ⁰⁰ Office Use |
| 10/02/12 | STRACHOTA, MARK 8890 GREENVIEW LN GREENDALE, WI 53129 | SECURITY OFFICER CHILDREN'S HOSPITAL 9200 W. WISCONSIN AVE MILWAUKEE, WI 53226 | \$100 ⁰⁰ | \$200 ⁰⁰ Office Use |
| 10/02/12 | MOEWS, NANCY 696 SHEATH MEADOW CT GREENDALE, WI 53129 | RETIRED | \$500 ⁰⁰ | \$600 ⁰⁰ Office Use |
| 10/02/12 | KRAISIN, SARAH 1551 MADISON ST #3 DENVER, CO 80210 | CONSULTANT CCS FUNDRAISING CHICAGO, IL | \$200 ⁰⁰ | \$200 ⁰⁰ Office Use |
| 10/02/12 | SCHOOLS, KEVIN 3675 RIVERSIDE DR #8 GREENFIELD, WI 53228 | CORRECTION OFFICER HOUSE OF CORRECTION 88PS S. 68TH ST FRANKLIN, WI | \$100 ⁰⁰ | \$350 ⁰⁰ Office Use |
| SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE | | | \$1300 ⁰⁰ | |
| TOTAL ITEMIZED CONTRIBUTIONS | | | \$1085 ⁰⁰ | |
| TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS | | | \$ | |
| TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS | | | \$2385 ⁰⁰ | |

Contributions (Including Loans) From Individuals

Complete Committee Name
Friends of CIVIL MOEMS

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 |
|----------|------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|---------------------|-----------------------------|
| 10/02/12 | STEARNS, JAMES 2605 N. SUMMIT AVE MILWAUKEE, WI 53211 | RETIRED | \$100 ⁰⁰ | \$100 ⁰⁰ |
| 10/02/12 | FALK, TERRENCE 297 P. S. WENTWORTH AVE MILWAUKEE, WI | SCHOOL BOARD MEMBER MILW PUBLIC SCHOOLS MILWAUKEE, WI | \$100 ⁰⁰ | \$100 ⁰⁰ |
| 10/02/12 | SANTORO, SANDY 3361 E. RAMSEY AV CWAHAY, WI 53110 | DEPUTY SHERIFF MILWAUKEE COUNTY 821 W. STATE ST. MILWAUKEE, WI 53233 | \$100 ⁰⁰ | \$100 ⁰⁰ |
| 10/02/12 | GRAEBER, JOHN 1535 N 119 ST WAUWATOSA, WI | UNKNOWN USDA FOREST SERVICE 626 E. WISCONSIN #300 MILWAUKEE, WI | \$100 ⁰⁰ | \$100 ⁰⁰ |
| 10/02/12 | GILL, Joanne 5398 S. HIDDEN AVE GREENFIELD, WI | RETIRED | \$30 ⁰⁰ | \$30 ⁰⁰ |
| 10/02/12 | LA FOND, JUDITH 9417 W. ST. PAUL AVE MILWAUKEE, WI | UNKNOWN | \$50 ⁰⁰ | \$50 ⁰⁰ |
| 10/02/12 | LA FUENTE RESTAURANT 9155 W. BLUEMOUND MILWAUKEE, WI 53226 | RESTAURANT | \$386 ⁰⁰ | \$386 ⁰⁰ |
| 10/02/12 | ZANON, MARY 5600 W. MITCHELL ST WEST ALLIS, WI 53214 | RETIRED | \$75 ⁰⁰ | \$75 ⁰⁰ |

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE \$ 891⁰⁰

TOTAL ITEMIZED CONTRIBUTIONS \$ 235⁰⁰

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS \$ 0

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS \$ 3276⁰⁰

IN-KIND

RECEIPTS
Contributions (Including Loans) From Individuals

Complete Committee Name
FRIENDS OF CHRIS MOEWS

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 |
|----------|-----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|---------------------|-----------------------------|
| 10/02/12 | WARD, JIM 5225 MORLEY DR GREENDALE, WI 53129 | TEACHER | \$50 ⁰⁰ | \$50 ⁰⁰ |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan | | | Office Use |
| 10/02/12 | OTIS, NANCY 1308 ANDERSEN ST BLOOMINGTON, IL 61701 | RETIRED | \$50 ⁰⁰ | \$50 ⁰⁰ |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan | | | Office Use |
| 10/02/12 | SMITH, GREGORY 4415 S. 5 ST. MILWAUKEE, WI 53207 | DEVELOPMENT DIRECTOR CASA ROMERO 423 W. BRUCE ST MILWAUKEE, WI 53204 | \$50 ⁰⁰ | \$50 ⁰⁰ |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan | | | Office Use |
| 10/02/12 | FABIAN, JAMES 3540 S. 111 ST GREENFIELD, WI | MAINTENANCE HOUSE OF CORRECTION 8885 S. 68 ST. FRANKLIN, WI | \$50 ⁰⁰ | \$100 ⁰⁰ |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan | | | Office Use |
| 10/02/12 | LOWENBERG, ERIC 2492 S. DELAWARE AVE MILWAUKEE, WI | SELF EMP - ATTORNEY 166 SS W. BLUEMOND #19C BROOKFIELD, WI 53005 | \$50 ⁰⁰ | \$50 ⁰⁰ |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan | | | Office Use |
| 10/02/12 | GROCHOWSKI, ADAM 8920 W. TRIPOLI AVE MILWAUKEE, WI 53228 | POLICE OFFICER CITY OF MILWAUKEE 749 W. STATE ST. MILWAUKEE, WI 53233 | \$100 ⁰⁰ | \$100 ⁰⁰ |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan | | | Office Use |
| 10/02/12 | ZEIGEL, Joanne 1610 N. PROSPECT #802 MILWAUKEE, WI 53202 | RETIRED | \$25 ⁰⁰ | \$25 ⁰⁰ |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan | | | Office Use |
| 10/05/12 | MOEWS, CHRIS 5417 W JERELYN PL MILWAUKEE, WI 53219 | POLICE OFFICER CITY OF MILWAUKEE 749 W. STATE ST MILWAUKEE, WI 53233 | \$200 ⁰⁰ | \$200 ⁰⁰ |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan | | | Office Use |

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 575⁰⁰

TOTAL ITEMIZED CONTRIBUTIONS

\$ 3276⁰⁰

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS

\$ -

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ 3276⁰⁰

RECEIPTS
Contributions (Including Loans) From Individuals

Complete Committee Name
FRIENDS OF CHRIS MOENS

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 |
|----------|-----------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|---------------------|-----------------------------|
| 10/02/12 | MICHAEL BALISTRIERE 2002 N. 118TH ST WAUKWATOSA, WI 53213 | LABOR LIAISON MILW AREA LABOR COUNCIL 633 S. HAWLEY RD WAUKWATOSA, WI 53213 | \$50 ⁰⁰ | \$50 ⁰⁰ |
| 10/02/12 | RICHARD GRABER P.O. BOX 370201 MILWAUKEE, WI 53237 | RETIRED | \$100 ⁰⁰ | \$150 ⁰⁰ |
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SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 150⁰⁰

TOTAL ITEMIZED CONTRIBUTIONS

\$ 385⁰⁰

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS

\$ 0

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ 400⁰⁰

RECEIPTS
Contributions from Committees
(Transfers-In)

Complete Committee Name
FRIENDS OF CHRIS MOEWS

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

| Date / / | Full Name of Committee, Mailing Address and Zip Code | Amount | Calendar Year-To-Date Total |
|--------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------|
| / / | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Full Name of Committee, Mailing Address and Zip Code | Amount | Calendar Year-To-Date Total |
| / / | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Full Name of Committee, Mailing Address and Zip Code | Amount | Calendar Year-To-Date Total |
| / / | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Full Name of Committee, Mailing Address and Zip Code | Amount | Calendar Year-To-Date Total |
| / / | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Full Name of Committee, Mailing Address and Zip Code | Amount | Calendar Year-To-Date Total |
| / / | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Full Name of Committee, Mailing Address and Zip Code | Amount | Calendar Year-To-Date Total |
| / / | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Full Name of Committee, Mailing Address and Zip Code | Amount | Calendar Year-To-Date Total |
| / / | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Full Name of Committee, Mailing Address and Zip Code | Amount | Calendar Year-To-Date Total |
| / / | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Full Name of Committee, Mailing Address and Zip Code | Amount | Calendar Year-To-Date Total |
| / / | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Full Name of Committee, Mailing Address and Zip Code | Amount | Calendar Year-To-Date Total |
| SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE | | \$ <u>0</u> | |
| TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES | | \$ <u>0</u> | |

RECEIPTS
Other Income and Commercial Loans

Complete Committee Name

FRIENDS OF CHRIS MOLENS

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 |
|-------------|----------------------------------------------------------------|----------------|--------|
| / / | Full Name, Mailing Address and Zip Code of Source of Income | Type of Income | Amount |
| / / | Full Name, Mailing Address and Zip Code of Source of Income | Type of Income | Amount |
| / / | Full Name, Mailing Address and Zip Code of Source of Income | Type of Income | Amount |
| / / | Full Name, Mailing Address and Zip Code of Source of Income | Type of Income | Amount |
| / / | Full Name, Mailing Address and Zip Code of Source of Income | Type of Income | Amount |
| / / | Full Name, Mailing Address and Zip Code of Source of Income | Type of Income | Amount |
| / / | Full Name, Mailing Address and Zip Code of Source of Income | Type of Income | Amount |
| / / | Full Name, Mailing Address and Zip Code of Source of Income | Type of Income | Amount |
| / / | Full Name, Mailing Address and Zip Code of Source of Income | Type of Income | Amount |

SUBTOTAL OTHER INCOME THIS PAGE

\$ 0

TOTAL ITEMIZED OTHER INCOME

\$ 0

TOTAL UNITEMIZED OTHER INCOME \$20 OR LESS

\$ 0

TOTAL OTHER INCOME

\$ 0

SCHEDULE 2-A

**DISBURSEMENTS
Gross Expenditures**

Complete Committee Name
FRIENDS OF CHRIS MOEWS

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 |
|----------|------------------------------------------------------------------------------------------|---------------------------------|----------------------|
| 10/01/12 | LAFUENTE 9155 W. BLUEMOUND RD MILWAUKEE, WI 53226 | FOOD FOR FUND RAISER | \$ 386 ⁰⁰ |
| 10/08/12 | HSG CAMPAIGNS LLC 2322 S KINNICKINNIC AVE MILWAUKEE, WI 53207 | FUND RAISER EXPENSES | \$ 610 ⁰³ |
| / / | Check if: <input type="checkbox"/> In-Kind Offset | | |
| / / | Check if: <input type="checkbox"/> In-Kind Offset | | |
| / / | Check if: <input type="checkbox"/> In-Kind Offset | | |
| / / | Check if: <input type="checkbox"/> In-Kind Offset | | |
| / / | Check if: <input type="checkbox"/> In-Kind Offset | | |
| / / | Check if: <input type="checkbox"/> In-Kind Offset | | |
| / / | Check if: <input type="checkbox"/> In-Kind Offset | | |
| / / | Check if: <input type="checkbox"/> In-Kind Offset | | |

| | |
|--------------------------------------------|----------------------|
| SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE | \$ 996 ⁰³ |
| TOTAL ITEMIZED EXPENDITURES | \$ 996 ⁰³ |
| TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS | \$ 0 |
| TOTAL EXPENDITURES | \$ 996 ⁰³ |

SCHEDULE 2-B

DISBURSEMENTS
Contributions To Committees
(Transfers-Out)

Complete Committee Name
FRIENDS OF CHRIS MORRIS

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 |
|---------------------------------------------------------------|--------------------------------------------------------------------------|-------------|-----------------------------|
| / / | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| / / | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| / / | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| / / | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| / / | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| / / | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| / / | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| / / | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| / / | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| / / | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE | | \$ <u>0</u> | |
| TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES | | \$ <u>0</u> | |

SCHEDULE 3-A

**ADDITIONAL DISCLOSURE
Incurred Obligations Excluding Loans**

Complete Committee Name
FRIENDS OF CHARL MOEWS

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 |
|--------------------------|-----------------------------------------------------|-------------------------------------------|------------------------------------------|---------------------------------|---------------------------------------------|
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| Nature of Debt (Purpose) | | | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| Nature of Debt (Purpose) | | | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| Nature of Debt (Purpose) | | | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| Nature of Debt (Purpose) | | | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| Nature of Debt (Purpose) | | | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| Nature of Debt (Purpose) | | | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| Nature of Debt (Purpose) | | | | | |

| | | |
|--------------------------------------------------|----|----------|
| SUBTOTAL ITEMIZED OBLIGATIONS THIS PAGE | \$ | <u>0</u> |
| TOTAL ITEMIZED OBLIGATIONS | \$ | <u>0</u> |
| TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS | \$ | <u>0</u> |
| TOTAL INCURRED OBLIGATIONS | \$ | <u>0</u> |

ADDITIONAL DISCLOSURE
Loans
Individual, Committee or Commercial

Complete Committee Name
FRIENDS OF CHRIS MOEWS

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

| | 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 |
|------------------------------------------------------|--------------------------------------------------------|----------------------------------------------|-----------------------|---------------------------------|----------------------------------------|
| Date / / | | | | | |
| 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 / / | | | | | |
| 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 / / | | | | | |
| 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 \$ 0

TOTAL OUTSTANDING LOANS \$ 0