

**CAMPAIGN FINANCE REPORT  
LOCAL COMMITTEES OF WISCONSIN**

7-1-12 to 12-31-12

MILWAUKEE COUNTY  
ELECTION COMMISSION

Is This Report an Amendment:     Yes     No

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

2013 JAN 31 A 10:31

**COMMITTEE IDENTIFICATION**

Name of Committee  
*Friends of Peggy Romo West*

Street Address  
*2512 W Greenfield Ave*

City, State and Zip Code  
*Milw WI 53004*

**RECEIVED** *jev*

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	\$ <i>1225.30</i>	\$
1B. Contributions from Committees (Transfers-In)	\$	\$
1C. Other Income and Commercial Loans	\$	\$
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)	\$ <i>1225.30</i>	\$

**2. DISBURSEMENTS**

2A. Gross Expenditures	\$	\$
2B. Contributions to Committees (Transfers-Out)	\$	\$
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	\$	\$

**CASH SUMMARY**

Cash Balance Beginning of Report	\$ <i>1,583.06</i>
Total Receipts	\$ <i>1225.30</i>
Subtotal	\$ <i>2808.36</i>
Total Disbursements	\$ <i>1713.70</i>
<b>CASH BALANCE END OF REPORT</b>	\$ <i>1094.66</i>
<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 <i>Jay Reinke</i>	Signature of Candidate or Treasurer <i>Jay Reinke</i>	Date: <i>1/30/13</i> Daytime Phone:
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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.

**Contributions (Including Loans) From Individuals**

Complete Committee Name  
**Friends of Peggy Reno West**

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
9/25/12	Kathryn Andrea 6803 3rd Ave. Kenosha WI 53143 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit		100-	
9/20/12	Jeanette Balistreri 200 W. Orchard Way Oak Creek, WI 53154 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit		25-	
9/20/12	Wendy Bayer 3427 A. S. 10th St. Milw WI 53215 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit		25-	
9/20/12	Dolka Garcia 8868 S. 27th St Milw WI 53154 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit		20-	
9/20/12	Marjorie Gleason 5721 W. Washington Milw WI 53206 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit		50-	
9/20/12	Janelle Jensen 2020 S 5th Pl Milw. WI 53204 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit		25-	
9/20/12	Leonor Rosa 3713 S. 15th St. Milw WI 53221 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit		50-	
9/20/12	Ruth Ryshe 3514 S. 49th St. Greenfield, WI 53200 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit		50-	

**SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE**

\$ 345-

**TOTAL ITEMIZED CONTRIBUTIONS**

\$

**TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS**

\$

**TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS**

\$

Complete Committee Name  
**Friends of Peggy Rom WST**

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
9/20/12	Gary Spranger 1633 W. Edwards Dr. Meyers, WI 53092	Health Adm. ANEW Health Mgt. 7425 Herwood Ave Meyers WI 53092	\$355.30	
9/20/12	Sally Spranger 1633 W Edwards Dr Meyers, WI 53092	Nurse Adm. ANEW Health Care Mgt. 7425 Herwood Ave Meyers WI 53092	\$475.00	
9/20/12	Kevin Schrafs 3675 S Riverside Dr #8 Greenfield WI 53028		\$50.00	
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<b>SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE</b>	\$880.30
<b>TOTAL ITEMIZED CONTRIBUTIONS</b>	\$345.00
<b>TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS</b>	\$
<b>TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS</b>	\$345.30

Complete Committee Name

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
7/9/12	Union Copy Center 3060 S 43rd ST. MILWAUKEE WI 53219	Flyers	108.00
8/21/12	OFFICE MAX 2100 S. Milken Parkway MILWAUKEE WI	Supplies	19.48
8/22/12	Hostgator.com	Website update	81.75
9/7/12	Wolgreens 2625 W National MILWAUKEE WI	Supplies	11.66
9/11/12	Post OFFICE 1716 S. 1st ST MILWAUKEE WI	Envelope/Postage	9.00
9/19/12	Alterra Coffee 170 S 1st ST MILWAUKEE WI	Meeting	6.26
9/20/12	Family Dollar 623 W Mitchell ST	Fund Raiser supplies	9.40
9/20/12	Sally Sprungel 1632 W. Edward Dr Mequon, WI 53092	Return of donation	355.30
9/27/12	Americas Best Value Inn La Crosse, WI 2022 Rose St	Presale @ Conference	136.94

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE

\$ 737.79

TOTAL ITEMIZED EXPENDITURES

\$

TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS

\$

TOTAL EXPENDITURES

\$

Complete Committee Name

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
9/23/12	Factory Card Outlet 6715 W Green Oak Ave Mish Wt Check if: <input type="checkbox"/> In-Kind Offset	Supplies	47.20
10/1/12	Family Dtlr 625 W Mitchell Mish Wt Check if: <input type="checkbox"/> In-Kind Offset	Supplies	31.01
10/15/12	Sprint.com Check if: <input type="checkbox"/> In-Kind Offset	phone	80.00
12/4/12	Pick-N-Save 1815 W National Ave Mish Wt Check if: <input type="checkbox"/> In-Kind Offset	Med's Suppls	10.99
12/20/12	Tessera Design 3924 S. Lake Dr. ST Francis, WI 53235 Check if: <input type="checkbox"/> In-Kind Offset	Web-De-Design.	600.00
12/29/12	Sprint.com Check if: <input type="checkbox"/> In-Kind Offset	phone	206.71
/ /	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
/ /	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

<b>SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE</b>	\$ 975.91
<b>TOTAL ITEMIZED EXPENDITURES</b>	\$ 737.79
<b>TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS</b>	\$
<b>TOTAL EXPENDITURES</b>	\$ 1713.70