

MILWAUKEE COUNTY  
ELECTION COMMISSION

2013 JAN 30 A 11:11

**CAMPAIGN FINANCE REPORT  
STATE OF WISCONSIN**

**RECEIVED**

Is this report an  
Amendment?

*Handwritten initials*

**COMMITTEE IDENTIFICATION**

Name of Committee **FRIENDS OF DON SCHWARTZ**

Address **5811 S 121ST STREET**

City, State, ZIP **HALES CORNERS WI 53129**

OFFICE USE ONLY

GAB # ID

**NAME OF REPORT** Jan 2013X\_\_ Continuing Pre-Primary 20\_\_ Spring Fall Special  
July 20\_\_ Continuing Pre-election 20\_\_ Spring Fall Special

**SUMMARY OF RECEIPTS AND DISBURSEMENTS**

1. RECEIPTS	Column A This Period	Column B YTD	Audited Totals Office Use Only	
A. Contributions including Loans from Individuals	\$ -			
B. Contributions from Committees (Transfers-In)	\$ -			
C. Other Income and Commercial Loans	\$ -			
<b>TOTAL RECEIPTS (Add totals from 1A, 1B, and 1C)</b>	\$ -	\$ -		

**1. DISBURSEMENTS**

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

**CASH SUMMARY**

Cash Balance at Beginning of Report	\$ 40.20
Total Receipts	\$ -
Subtotal	\$ 40.20
Total Disbursements	\$ -
<b>CASH BALANCE AT END OF REPORT</b>	\$ 40.20
<b>INCURRED OBLIGATIONS (at close of period)</b>	\$ -
<b>LOANS (at close of period)</b>	\$ -

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  
Donald G. Schwartz

Signature of Candidate or Treasurer

*Donald G. Schwartz*

Date 1/30/2013

Daytime Phone 414-218-2395

NOTE: The information on this form is required by ss. 11.06, 11.20, Wis. Stats.

Failure to provide this information may subject you to the penalties of ss. 11.09, 11.82, Wisconsin Stats.