

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

1-1-13 to 6-30-13
MILWAUKEE COUNTY
ELECTION COMMISSION
2013 JUL 22 P 12:42
RECEIVED
OFFICE USE ONLY

Is This Report an Amendment: Yes No

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

COMMITTEE IDENTIFICATION

Name of Committee

FRIENDS OF TOM ANTHONY

Street Address

578 W16595 SPINDAKER DR

City, State and Zip Code

HUSKEGO, WI 53150

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 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

\$ **1,580.00**

\$ **6,354.62**

1B. Contributions from Committees (Transfers-In)

\$ **450.00**

\$ **1,650.00**

1C. Other Income and Commercial Loans

\$

\$

TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)

\$ **2,030.00**

\$ **8,184.62**

2. DISBURSEMENTS

2A. Gross Expenditures

\$ **3,866.53**

\$ **8,002.04**

2B. Contributions to Committees (Transfers-Out)

\$

\$

TOTAL DISBURSEMENTS (Add totals from 2A and 2B)

\$ **3,866.53**

\$ **8,002.04**

CASH SUMMARY

Cash Balance Beginning of Report

\$ **3,424.47**

Total Receipts

\$ **2,030.00**

Subtotal

\$ **5,454.47**

Total Disbursements

\$ **3,866.53**

CASH BALANCE END OF REPORT

\$ **182.43**

INCURRED OBLIGATIONS

(Balance at the Close of This Period-3A)

\$

LOANS (Balance at the Close of This Period-3B)

\$ **1,427.06**

* REFUND CHECK TO SANFELIPPO
FOR ASSEMBLY WASN'T CASHED YET,
I HAVE ALERTED THEM THAT THEY
HAVE TO STILL CASH IT.

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

PAUL SNIFKA

Signature of Candidate or Treasurer

Paul Snifka

Date: **7/22/13**

Daytime Phone: **414-630-2110**

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.

Contributions (Including Loans) From Individuals

Complete Committee Name
FRIENDS OF TOM ANTHONY

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
3/20/13	NORA LYNCH 3075 N. 78 th ST. MILWAUKEE, WI 53222		30.00	30.00
Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit		Conduit Name: _____		
3/20/13	JOE RILE 1005 E CIRCLE DR WHITEFISH BAY, WI 53217		100.00	100.00
Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit		Conduit Name: _____		
3/20/13	JOHN BEUWER 7473 KARTH CT FRANKLIN, WI 53132		30.00	30.00
Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit		Conduit Name: _____		
3/20/13	MICHAEL SANDVICK 828 W ABBOTT AVE MILWAUKEE, WI 53221		30.00	30.00
Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit		Conduit Name: _____		
3/20/13	ROBERT DIECK 5121 RUSSELL CT W GREENDALE, WI 53129		50.00	50.00
Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit		Conduit Name: _____		
3/20/13	DAVID FRANSOY 4242 S 98 th ST. GREENFIELD, WI 53228		30.00	30.00
Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit		Conduit Name: _____		
3/20/13	JAMES ROKAS 6570 HILL RIDGE DR GREENDALE, WI 53129		20.00	20.00
Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit		Conduit Name: _____		
3/25/13	ROBERT HOWE N88 W117630 CHRISTIAN RD. MENOMONIE FALLS, WI 53061		50.00	50.00
Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit		Conduit Name: _____		

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE \$ **340.00**

TOTAL ITEMIZED CONTRIBUTIONS \$

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS \$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS \$

Contributions (Including Loans) From Individuals

Complete Committee Name
FRIENDS OF TOM ANTHONY

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
3/25/13	JAMES Mc FARLAND 1633 N. PROSPECT AVE MILWAUKEE, WI 53202	ATTORNEY NORTHWESTERN MUTUAL FINANCIAL NETWORK 720 E. WISCONSIN AVE MILWAUKEE, WI 53202	150.00	150.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
3/28/13	JEAN RIEBOLDT 5241 W HAYES AVE WEST ALLIS, WI 53219	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	50.00	50.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
3/20/13	DANIEL GABLER 9627 N LAKE DRIVE BAYSIDE, WI 53217	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	40.00	40.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
3/26/13	HARY HIRSCH 933 E LEXINGTON BLVD MILWAUKEE, WI 53217	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	50.00	50.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
3/20/13	REBECCA SANFELIPPO 12024 W. EUCLID AVE WEST ALLIS, WI 53227	HALES CORNERS LUTHERAN SCHOOL 12555 W. JAMESVILLE RD MUSKEGO, WI 53150 TEACHER	250.00	250.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
/ /	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
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
/ /	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
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
/ /	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
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE \$ **540.00**

TOTAL ITEMIZED CONTRIBUTIONS \$

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS \$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS \$

Contributions (Including Loans) From Individuals

Complete Committee Name
FRIENDS OF TOM ANTHONY

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
4/26/13	TOM ANTHONY ROEM 9765 W PLAINFIELD AVE GREENFIELD, WI 53228	PRINT SHOP MANAGER MCTS 1942 N 17TH ST MILWAUKEE, WI 53205	700.00	4059.62
/ /	Check if: <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		Calendar Year-to-Date Total
/ /	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
/ /	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		Calendar Year-to-Date Total
/ /	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
/ /	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		Calendar Year-to-Date Total
/ /	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
/ /	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		Calendar Year-to-Date Total
/ /	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
/ /	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		Calendar Year-to-Date Total
/ /	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
/ /	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		Calendar Year-to-Date Total

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ **700.00**

TOTAL ITEMIZED CONTRIBUTIONS

\$

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS

\$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ **1580.00**

RECEIPTS
Contributions from Committees
(Transfers-In)

Complete Committee Name
FRIENDS OF TOM ANTHONY

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
3 / 20 / 13	REPUBLICAN PARTY OF THE 1ST CONGRESSIONAL DIST. OF WIS 706 SCHOOL STREET SILVER LAKE, WIS 53170 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	200.00	200.00
3 / 26 / 13	4TH CONGRESSIONAL DISTRICT REPUBLICAN PARTY OF WIS 1700 S. 5TH ST. WEST ALLIS, WIS 53214 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	250.00	250.00
/ /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
/ /	Full Name of Committee, 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-In) THIS PAGE		\$ 450.00	
TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES		\$ 450.00	

Complete Committee Name
FRIENDS OF TOM ANTHONY

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
4/1/13	FNC BANK	BANK SERVICE CHARGES	3.00
	Check if: <input type="checkbox"/> In-Kind Offset		
4/2/13	SANFELIPPO FOR ASSEMBLY 12024 W EULLID AVE WEST ALLIS, WI 53227	REPAYMENT FOR PREVIOUS CONTRIBUTION WHICH WAS IN EXCESS OF ALLOWED AMOUNT.	97.36
	Check if: <input type="checkbox"/> In-Kind Offset		
4/22/13	TOM ANTHONY ROEMER 9765 W PLAINFIELD AVE GREENFIELD, WI 53228	REPAYMENT OF LOAN FOR UNION COPY CENTER POST CARDS.	1463.23
	Check if: <input type="checkbox"/> In-Kind Offset		
4/30/13	TOM ANTHONY ROEMER 9765 W PLAINFIELD AVE GREENFIELD, WI 53228	REPAYMENT OF LOAN FOR ARIE'S PRINTING SERVICES WEBSITE HOSTING UNION COPY CENTER POSTCARDS	2302.94
	Check if: <input type="checkbox"/> In-Kind Offset		
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure (CHARGED WITH CREDIT CARD)	Amount
	Check if: <input checked="" type="checkbox"/> In-Kind Offset		
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
	Check if: <input type="checkbox"/> In-Kind Offset		
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
	Check if: <input type="checkbox"/> In-Kind Offset		
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
	Check if: <input type="checkbox"/> In-Kind Offset		
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
	Check if: <input type="checkbox"/> In-Kind Offset		

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE \$ **3866.53**

TOTAL ITEMIZED EXPENDITURES \$

TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS \$

TOTAL EXPENDITURES \$ **3866.53**

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

Complete Committee Name
FRIENDS OF TOM ANTHONY

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
6/30/13	TOM ANTHONY ROETH 9765 W PLAINFIELD AVE GREENFIELD, WI 53228	4,493.23	700.00	3,766.17	1,427.06

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 \$ **1427.06**

TOTAL OUTSTANDING LOANS \$ **1427.06**