

Campaign Finance Report

Short Form GAB-2a
Government Accountability Board

GAB ID Number

Spring Fall Special Pre-Primary Continuing Report due Jan. 31, _____
 Spring Fall Special Pre-Election _____ Continuing Report due July 20, _____

FRIENDS OF TOM ANTHONY

Name of Candidate or Committee (in full)

578 W16595 SPRUNKER DR

Address (number and street)

MUSKEGO, WI 53150

City, State, Zip

I certify that the above named committee or candidate did not receive contributions or other income, make disbursements, or incur obligations during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills filing requirements under Sec. 11.06(9), Stats.

Signature of Committee Treasurer or Candidate

Paul Griffin

Date

2/8/2013

Daytime Phone

414-630-2110

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

1-1-13 to 2-4-13

Is This Report an Amendment: Yes No

MILWAUKEE COUNTY
ELECTION COMMISSION

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

COMMITTEE IDENTIFICATION

2013 FEB - 8 P 4:45

Name of Committee

FRIENDS OF TOM ANTHONY

RECEIVED
OFFICE USE ONLY

Street Address

578 W16595 SPINDAKER DR

City, State and Zip Code

MUSKEGO, 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

	Column A This Period	Column B Calendar Year-To-Date
1. RECEIPTS		
1A. Contributions (Including Loans) from Individuals	\$ 0	\$ 0
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	\$	\$
2B. Contributions to Committees (Transfers-Out)	\$	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 0	\$ 0

CASH SUMMARY

Cash Balance Beginning of Report	\$ 2,262.11
Total Receipts	\$
Subtotal	\$
Total Disbursements	\$
CASH BALANCE END OF REPORT	\$ 2,262.11
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ 896.39 ✓
LOANS (Balance at the Close of This Period-3B)	\$ 2,030.00

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 PAUL SWIFKA	Signature of Candidate or Treasurer <i>Paul Swifka</i>	Date: 2/8/2013
		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 proscribed by the Government Accountability Board. Completed forms must be filed with your local clerk.

**ADDITIONAL DISCLOSURE
Incurred Obligations Excluding Loans**

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 Creditor	Outstanding Balance Beginning This Period	New Obligations or Additions This Period	Cumulative Payments This Period	Outstanding Balance At Close of This Period
VARIOUS	TOM ANTHONY ROEHL 9765 W PLAINFIELD AVE GREENFIELD, WI 53228	0	\$ 896.39	0	\$ 896.39
		Nature of Debt (Purpose) GODADDY.COM REGISTRATION (\$47.00)			
		Nature of Debt (Purpose) CAMPAIGN PARTNER WEBSITE (\$81.00)			
		Nature of Debt (Purpose) BIG DADDY YARD SIGNS (\$564.87)			
		Nature of Debt (Purpose) ARIES PRINT PALM CARDS (\$171.13)			
		Nature of Debt (Purpose) OFFICE DEPOT BUSINESS CARD STOCK (\$26.39)			
		Nature of Debt (Purpose)			
		Nature of Debt (Purpose)			

SUBTOTAL ITEMIZED OBLIGATIONS THIS PAGE	\$	896.39
TOTAL ITEMIZED OBLIGATIONS	\$	896.39
TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS	\$	
TOTAL INCURRED OBLIGATIONS	\$	896.39

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
11/23/12	TOM ANTHONY RUEHL 9765 W PLAINFIELD AVE GREENFIELD, WI 53228	\$ 2,030.00	0	0	82,030.00

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
/ /					

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	\$ 2,030.00
TOTAL OUTSTANDING LOANS	\$ 2,030.00