

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

MILWAUKEE COUNTY
ELECTION COMMISSION

Is This Report an Amendment: Yes No

2014 JUL 21 P 12: 15

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

RECEIVED *JE*

COMMITTEE IDENTIFICATION

Name of Committee

Friends of Willie Johnson JR.

Street Address

3869 N Humboldt Blvd #206

City, State and Zip Code

Milwaukee WI 53212-1361

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 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

\$ 1,220.00

\$ 7,467.00

1B. Contributions from Committees (Transfers-In)

\$

\$ 1,235.19

1C. Other Income and Commercial Loans

\$.13

\$ 6.46

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

\$ 1,220.13

\$ 8,708.65

2. DISBURSEMENTS

2A. Gross Expenditures

\$ 2,342.00

\$ 2,342.00

2B. Contributions to Committees (Transfers-Out)

\$

\$

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

\$ 2,342.00

\$ 2,342.00

CASH SUMMARY

Cash Balance Beginning of Report

\$ 4,209.12

Total Receipts

\$ 1,220.13

Subtotal

\$ 2,429.25

Total Disbursements

\$ 2,342.00

CASH BALANCE END OF REPORT

\$ 87.25

INCURRED OBLIGATIONS

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

\$ —

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

\$ 1,220.00

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

Signature of Candidate or Treasurer

Date: July 20, 2014

Kennie D. Hart

Kennie D. Hart

Daytime Phone: 414-344-6862

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.

Complete Committee Name

Friends OF Willie Johnson JR

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 12/1/14	Willie Johnson JR 3869 N. Humboldt Blvd APT 206 MILWAUKEE WI 53210	County Board Supervisor 901 N 9TH ST MILWAUKEE WI 53233	\$1,120.00	\$1,120.00
4 11 14	Willie Johnson JR 3869 N Humboldt Blvd APT 206 MILWAUKEE WI 53210	County Board Supervisor 901 N 9TH ST MILWAUKEE WI 53233	\$100.00	\$1,220.00
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SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$1,220.00

TOTAL ITEMIZED CONTRIBUTIONS

\$

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS

\$.13

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$1,220.13

SCHEDULE 2-A

**DISBURSEMENTS
Gross Expenditures**

Complete Committee Name
Friends of Willie JOHNSON, JR

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
2 12/17/14	Riverwest Current INC. P.O. Box 716 Milwaukee WI 53201-0716 Check if: <input type="checkbox"/> In-Kind Offset	Advertisement	\$ 335.00
2 05/1/14	Riverwest Current INC. P.O. Box 716 Milwaukee WI 53201-0716 Check if: <input type="checkbox"/> In-Kind Offset	Fee for money order	5.00
3 05/1/14	The Milwaukee Times 1938 N. Dr. Martin Luther King Dr. Milwaukee WI 53312 Check if: <input type="checkbox"/> In-Kind Offset	Advertisement	390.00
3 05/1/14	The Milwaukee Times 1938 N. Dr. Martin Luther King Dr. Milwaukee WI 53312 Check if: <input type="checkbox"/> In-Kind Offset	Fee for Money order	5.00
3 05/1/14	Milwaukee Courier P.O. Box 06279 Milwaukee WI 53206 Check if: <input type="checkbox"/> In-Kind Offset	Advertisement	567.00
3 05/1/14	Milwaukee Community Journal P.O. Box 142542 Fayetteville GA 30214 Check if: <input type="checkbox"/> In-Kind Offset	Advertisement	1,000.00
3 05/1/14	Milw Courier - P.O. Box 06279 Milw Community Journal P.O. Box 142542 Check if: <input type="checkbox"/> In-Kind Offset	Fee for money orders (2)	10.00
4 13/1/14 5/31/14	BMO Harris Bank Check if: <input type="checkbox"/> In-Kind Offset	Maintenance Fee	10.00 10.00
10 30/1/14	BMO Harris Bank Check if: <input type="checkbox"/> In-Kind Offset	Maintenance Fee	10.00

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE \$ 2,342.00

TOTAL ITEMIZED EXPENDITURES \$ 2,342.00

TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS \$ 0

TOTAL EXPENDITURES \$ 2,342.00

ADDITIONAL DISCLOSURE
Loans
Individual, Committee or Commercial

Complete Committee Name
Friends of Willie Johnson JR.

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
<u>3/25/14</u>	<u>Willie Johnson JR</u> <u>3869 N Humboldt Blvd #206</u> <u>Milwaukee WI 53212</u>	<u>0.00</u>	<u>1,220.00</u>	<u>—</u>	<u>1,220.00</u>

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor <u>Willie Johnson JR</u> <u>3869 N Humboldt Blvd #206</u> <u>Milwaukee WI 53212</u>	Occupation <u>County Board Supervisor</u>
	Name and Address of Employer <u>901 N 9th St. Milwaukee WI 53233</u>
	Amount Guaranteed Outstanding <u>\$1,220.00</u>

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
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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
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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 \$ 1,220.00

TOTAL OUTSTANDING LOANS \$ 1,220.00