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MILWAUKEE COUNTY
ELECTION COMMISSION

2015 JAN 29 A 11:35

RECEIVED

**CAMPAIGN FINANCE REPORT
WISCONSIN LOCAL COMMITTEE**

Is this report an Amendment? **YES** NO

COMMITTEE IDENTIFICATION

Name of Committee	Elect Scott Manske
Address	611 N 76th St
City, State, ZIP	Wauwatosa, WI 53213

OFFICE USE ONLY

Please check if address is different than previously reported

NAME OF REPORT	Jan 20__ Continuing	Pre-Primary 20__	Spring	Fall	Special
	July 2014 Continuing x	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	\$ 30.00	\$ 30.00		
B. Contributions from Committees (Transfers-In)	\$ -			
C. Other Income and Commercial Loans	\$ -			
TOTAL RECEIPTS (Add totals from 1A, 1B, and 1C)	\$ 30.00	\$ 30.00		

2. DISBURSEMENTS

A. Gross Expenditures	\$ 1,129.01	\$ 1,129.01		
B. Contributions to Committees (Transfers-Out)	\$ 100.00	\$ 100.00		
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 1,229.01	\$ 1,229.01		

CASH SUMMARY

Cash Balance at Beginning of Report	\$ 14,681.78			
Total Receipts	\$ 30.00			
Subtotal	\$ 14,711.78			
Total Disbursements	\$ 1,229.01			
CASH BALANCE AT END OF REPORT	\$ 13,482.77			
INCURRED OBLIGATIONS (at close of period)	\$ -			
LOANS (at close of period)	\$ 10,259.35			

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 Scott B. Manske	Signature of Candidate or Treasurer 	Date 01/29/15
	Email electscottmanske@att.net	Daytime Phone 414-399-9577

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.11.60, 11.61, Wisconsin Stats.

Print the completed report and file with your local clerk or election commission by the filing deadline.
GAB-2L (04/14)

2014 JUL 21 A 8:36

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**CAMPAIGN FINANCE REPORT
WISCONSIN LOCAL COMMITTEE**

Is this report an Amendment? YES NO

COMMITTEE IDENTIFICATION

Name of Committee: Elect Scott Manske
Address: 611 N 76th St
City, State, ZIP: Wauwatosa, WI 53213

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NAME OF REPORT Jan 20__ Continuing Pre-Primary 20__ Spring Fall Special
July 2014 Continuing x Pre-election 20__ Spring Fall Special

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Total Receipts	\$ 30.00			
Subtotal	\$ 14,711.78			
Total Disbursements	\$ 1,129.01			
CASH BALANCE AT END OF REPORT	\$ 13,582.77			
INCURRED OBLIGATIONS (at close of period)	\$ -			
LOANS (at close of period)	\$ 10,259.35			

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 Scott B. Manske	Signature of Candidate or Treasurer  electscottmanske @att.net	Date 7/21/2014	Daytime Phone 414-399-9577
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GAB-2L (04/14)

Schedule 2-A

Complete Committee Name		Elect Scott Manske	
Date	Full Name, Mailing Address and Zip Code of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
3/1/14	South Side Scholarship Foundation, P O Box 070562, Milwaukee, WI 53207 In Kind Offset <input type="checkbox"/>	Ad for annual fundraiser	\$ 110.00
3/1/14	Mary Claire Fagin 2348 N Terrace Ave, Milwaukee, WI 53211 In Kind Offset <input type="checkbox"/>	Political Consulting	\$ 1,000.00
3/14/14	Weber Printing Co, 3048 N 34th St, Milwaukee, WI 53210 In Kind Offset <input type="checkbox"/>	Preparation of print ad for SSSF annual fundraiser	\$ 19.01
	In Kind Offset <input type="checkbox"/>		
	In Kind Offset <input type="checkbox"/>		
	In Kind Offset <input type="checkbox"/>		
	In Kind Offset <input type="checkbox"/>		
	In Kind Offset <input type="checkbox"/>		
	In Kind Offset <input type="checkbox"/>		
	In Kind Offset <input type="checkbox"/>		
	In Kind Offset <input type="checkbox"/>		
	In Kind Offset <input type="checkbox"/>		

Subtotal Itemized Expenditures this page \$ 1,129.01
 Total Itemized Expenditures \$ 1,129.01
 Total Unitemized Expenditures \$20 or Less \$ -
 Total Expenditures \$ 1,129.01

SCHEDULE 2-B

DISBURSEMENTS
Contributions To Committees
(Transfers-Out)

Complete Committee Name
Elect Scott Manske

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

Date	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
06/30/14	Forward with Jo Costa, 1645 S 12th St, Milwaukee, WI 53204 Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <i>0104989</i>	100.00	100.00
/ /	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE		\$ 100.00	
TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES		\$ 100.00	

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

Complete Committee Name **Elect Scott Manske**

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
06/30/14	Scott Manske, 611 N 76th Wauwatosa WI 53213	10,259.35			10,259.35

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
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Full Name, Mailing Address and Zip Code of Guarantor	Occupation
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	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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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 \$ 10,259.35
TOTAL OUTSTANDING LOANS \$ 10,259.35