

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

Is This Report an Amendment: Yes No

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

MILWAUKEE COUNTY
ELECTION COMMISSION

2015 JUL 20 A 11: 12

RECEIVED 

OFFICE USE ONLY

COMMITTEE IDENTIFICATION

Name of Committee

Friends of David Cullen

Street Address

9131 W. Chambers St

City, State and Zip Code

Milwaukee, WI 53210

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 15 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

\$ —

\$

1B. Contributions from Committees (Transfers-In)

\$ —

\$

1C. Other Income and Commercial Loans

\$ —

\$

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

\$ —

\$

2. DISBURSEMENTS

2A. Gross Expenditures

\$ (135.88)

\$

2B. Contributions to Committees (Transfers-Out)

\$ 350.00

\$

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

\$ 214.12

\$

CASH SUMMARY

Cash Balance Beginning of Report

\$ 27,932.63

Total Receipts

\$ —

Subtotal

\$ 27,932.63

Total Disbursements

\$ 214.12

CASH BALANCE END OF REPORT

\$ 27,718.51

INCURRED OBLIGATIONS

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

\$ —

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

\$ 20,400.00

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

David A. Cullen

Signature of Candidate or Treasurer



Date: 7/20/15

Daytime Phone: 414-213-3777

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

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
/ /				
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
/ /				
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
/ /				
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
/ /				
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
/ /				
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
/ /				
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
/ /				
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$

TOTAL ITEMIZED CONTRIBUTIONS

\$

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS

\$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$

SCHEDULE 1-B

RECEIPTS
Contributions from Committees
(Transfers-In)

Complete Committee Name

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
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
Date / /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
Date / /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
Date / /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
Date / /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
Date / /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
Date / /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
Date / /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
Date / /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE		\$	
TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES		\$	

SCHEDULE 1-C

RECEIPTS
Other Income and Commercial Loans

Complete Committee Name

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

Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount

SUBTOTAL OTHER INCOME THIS PAGE \$

TOTAL ITEMIZED OTHER INCOME \$

TOTAL UNITEMIZED OTHER INCOME \$20 OR LESS \$

TOTAL OTHER INCOME \$

SCHEDULE 2-A

**DISBURSEMENTS
Gross Expenditures**

Complete Committee Name
Friends of David Cullen

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
1/15/15	Weber Printing 3048 N. 34 th Milwaukee, WI 53210 Check if: <input type="checkbox"/> In-Kind Offset	Donation of recycled signs	(200 ⁰⁰) offset of in kind contribution to committee
4/20/15	Pick N Save 6950 W. State Wauwatosa, WI 53213 Check if: <input type="checkbox"/> In-Kind Offset	Cell phone card (2 months)	64 ¹²
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE \$ (135.88)

TOTAL ITEMIZED EXPENDITURES \$

TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS \$

TOTAL EXPENDITURES \$ (135.88)

SCHEDULE 2-B

DISBURSEMENTS
Contributions To Committees
(Transfers-Out)

Complete Committee Name
Friends of David Culhen

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
1/15/15	Friends of Eddie Cullen 1747 N 56 th St Milwaukee, WI 53208 Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan	\$ 200 ⁰⁰ in-kind recycled signs	\$ 200 ⁰⁰
4/11/15	Friends of Eddie Cullen 1747 N. 56 th St Milwaukee, WI 53208 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	\$ 150 ⁰⁰	\$ 350 ⁰⁰
/ /	Full Name, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
/ /	Full Name, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
/ /	Full Name, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
/ /	Full Name, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
/ /	Full Name, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
/ /	Full Name, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
/ /	Full Name, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
/ /	Full Name, 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-Out) THIS PAGE		\$ 350 ⁰⁰	
TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES		\$ 350 ⁰⁰	

SCHEDULE 3-A

ADDITIONAL DISCLOSURE
Incurred Obligations Excluding Loans

Complete Committee Name

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

		Outstanding Balance Beginning This Period	New Obligations or Additions This Period	Cumulative Payments This Period	Outstanding Balance At Close of This Period
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			

SUBTOTAL ITEMIZED OBLIGATIONS THIS PAGE

\$

TOTAL ITEMIZED OBLIGATIONS

\$

TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS

\$

TOTAL INCURRED OBLIGATIONS

\$

ADDITIONAL DISCLOSURE
Loans
Individual, Committee or Commercial

Complete Committee Name
Friends of David Cullen

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>12/28/94</u>	<u>David Cullen</u> <u>2945 N. 68th St</u> <u>Milwaukee, WI 53210</u>	<u>12-31-92</u> <u>2-9-93</u> <u>\$ 20,400</u>	<u>—</u>	<u>—</u>	<u>\$ 20,400</u>

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
<u>/ /</u>					

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
<u>/ /</u>					

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 \$ 20,400
TOTAL OUTSTANDING LOANS \$ 20,400