CAMPAIGN FINANCE REPORT LOCAL COMMITTEES OF WISCONSIN			MILWAUK	EE COUNTY
Is This Report an Amendment:			ELECTION COMMISSION	
Instructions for completing schedules are on the back	of each schedule.		2016 JAN	12 A 9:41
COMMITTEE IDENTIFICATION			pro	ENZED I.
Name of Committee friends of Jim Schmitt				EIVEDLE
2517 N 88th ST			OF	FICE USE ONLY
City, State and Zip Code Warns Losa, WI	-			
Please check if address is different than previously reported, and	complete the Campaign Reg	istration State	ment in the b	ack of this form.
NAME OF REPORT				
☐ January Continuing ☐ Coll ☐ Pre-Primary ☐ Spring ☐ Fall ☐ Special ☐ Termination Report also complete Schedule 4				
SUMMARY OF RECEIPTS AND DISBURSEMENTS	Column A This Period	Colur Cale	ndar	
1. RECEIPTS		Year-T	o-Date	
1A. Contributions (Including Loans) from Individuals	\$	\$		
1B. Contributions from Committees (Transfers-In)	\$	\$		2
1C. Other Income and Commercial Loans	\$	\$		
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$	\$, A
2. DISBURSEMENTS				
2A. Gross Expenditures	\$ 50.00	\$ 50	. 60	
2B. Contributions to Committees (Transfers-Out)	\$ 0	\$ O		
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 50.00	\$ 56.	00	
CASH SUMMARY				_ ×
Cash Balance Beginning of Report	\$ 3,855,80			
Total Receipts	\$ 0			
Subtotal	\$ 0			
Total Disbursements	\$ 50.00	,		
CASH BALANCE END OF REPORT	\$ 3,805,80			
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ 6			
LOANS (Balance at the Close of This Period-3B) \$				
I courtify that I have arounized this report and to the host of m	n knowledge and helief it i	s true correc	et and count	ata

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

ype or Print Name of Candidate or Treasurer	Signature of Candidate or Treasurer Date: 1/12/16
-0.	james schmot County wisson
-lames 2 Johnitt	Email Daytime Phone: 278-4273

NOTE: The information on this form is required by ss. 11.0204, 11.0304, 11.0404, 11.0504, 11.0604, 11.0804, 11.0904, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.1400, 11.1401, Wis. Stats.



RECEIPTS Contributions (Including Loans) From Individuals

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Friends of Jim Schmitt	
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Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation (if year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
	Check if: Lin-Kind Loan Conduit – Ethics ID#			
	Once vi. Grandine Elecar Electrical Elimono.			
	Check if: 🗓 In-Kind 🗓 Loan 🖟 Conduit – Ethics ID#			
	Check if: Lin-Kind Li Loan Conduit - Ethics ID#			
	Check ii: in-Kind Loan Conduit ~ Einics D#		<u></u>	
	Check if: U In-Kind U Loan Conduit – Ethics ID#			
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	Check if: U In-Kind U Loan Conduit – Ethics ID#			
				•
	Check if: U In-Kind U Loan Conduit – Ethics ID#			
	Check if: In-Kind Loan Conduit – Ethics ID#			
	SUBTOTAL	ITEMIZED CONTRIBUTIONS THIS PAGE	\$	
		TOTAL ITEMIZED CONTRIBUTIONS	\$	
	TOTAL ANOI	NYMOUS CONTRIBUTIONS \$10 OR LESS	\$	
	TOTAL CONTRIB	BUTIONS RECEIVED FROM INDIVIDUALS	\$	

SCHEDULE 2-A

DISBURSEMENTS Gross Expenditures

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Complete Committee Name	
1 1 South	
Triends of lim Squitt	
Instructions for consulating appealules are an the book	of analysis askedula
Instructions for completing schedules are on the back	of each schedule.

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
11/01/15	Check if: I In-Kind Offset Whorth Aut with 3208	Donation	50.00
	Check if: LI In-Kind Offset		
	_		
	Check if: 🗵 In-Kind Offset		
;			
	Check if: In-Kind Offset		
	Check if: In-Kind Offset		
	Check if.		
	Check if: ☐ In-Kind Offset		
	[10]		
	Check if: I In-Kind Offset		
	Check if: 🔟 In-Kind Offset	<u></u>	
	SUB	TOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 50.00
		TOTAL ITEMIZED EXPENDITURES	\$ 50.00
		TOTAL UNITEMIZED EXPENDITURES	\$ 50,00
		TOTAL EXPENDITURES	\$ 50.00 \$ 50.00