

CAMPAIGN FINANCE REPORT LOCAL COMMITTEES OF WISCONSIN	MILWAUKEE COUNTY ELECTION COMMISSION 2016 JAN 15 P 2:21 RECEIVED OFFICE USE ONLY
Is This Report an Amendment: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Instructions for completing schedules are on the back of each schedule.	
COMMITTEE IDENTIFICATION	
Name of Committee	Friends of Don Schwartz
Street Address	5811 S. 121st Street
City, State and Zip Code	Hales Corners, WI 53130

Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form.

NAME OF REPORT	
<input checked="" type="checkbox"/> January Continuing <u>2016</u> <input type="checkbox"/> Pre-Primary _____ <input type="checkbox"/> July Continuing _____ <input type="checkbox"/> Spring <input type="checkbox"/> Fall <input type="checkbox"/> Special <input type="checkbox"/> September Continuing _____ <input type="checkbox"/> Pre-Election _____	<input type="checkbox"/> 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)	\$ 0	\$ 0
1C. Other Income and Commercial Loans	\$ 0	\$ 0
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 0	\$ 0
2. DISBURSEMENTS		
2A. Gross Expenditures	\$ 0	\$ 0
2B. Contributions to Committees (Transfers-Out)	\$ 0	\$ 0
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 0	\$ 0

CASH SUMMARY	
Cash Balance Beginning of Report	\$ 40.20
Total Receipts	\$ 0
Subtotal	\$ 40.20
Total Disbursements	\$ 0
CASH BALANCE END OF REPORT	\$ 40.20
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ 0
LOANS (Balance at the Close of This Period-3B)	\$ 0

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 Donald G. Schwartz	Signature of Candidate or Treasurer Email donaldgschwartz@gmail.com	Date: 1-15-16 Daytime Phone: 414-418-8299
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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.