

**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

2016 JUL 14 P 12:50

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COMMITTEE IDENTIFICATION

Name of Committee
Friends of Staskunas

Street Address
2010 South 103rd Ct.

City, State and Zip Code
West Allis, Wi. 53227

RECEIVED

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 Termination Report
 July Continuing 2016 Pre-Election _____ also complete Schedule 4
 September Continuing _____

SUMMARY OF RECEIPTS AND DISBURSEMENTS

	Column A This Period	Column B Calendar Year-To-Date
1. RECEIPTS		
1A. Contributions (Including Loans) from Individuals	\$ 870	\$ 3,265
1B. Contributions from Committees (Transfers-In)	\$ 0	\$ 750
1C. Other Income and Commercial Loans	\$.43	\$.81
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 870.43	\$ 4,015.81
2. DISBURSEMENTS		
2A. Gross Expenditures	\$ 0	\$ 4,509.93
2B. Contributions to Committees (Transfers-Out)	\$	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 0	\$ 4,509.93

CASH SUMMARY

Cash Balance Beginning of Report	\$ 2,709.20
Total Receipts	\$ 870.43
Subtotal	\$ 3,579.63
Total Disbursements	\$ 0
CASH BALANCE END OF REPORT	\$ 3,579.63
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$
LOANS (Balance at the Close of This Period-3B)	\$ 4,700

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 Anthony J. Staskunas	Signature of Candidate or Treasurer 	Date: 7-27-16
	Email	Daytime Phone: 541-9440

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.

Complete Committee Name
Friends of Staskunas

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

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
3-24-16	Michelle Mettner 4014 Council Crest Madison, Wi. 53711 Check if: <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		150	150
3-30-16	Moira Fitzgerald 925 East Wells St. Milwaukee, Wi. 53202 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		200	200
3-31-16	George H. Berger 9457 W. Mitchell St. West Allis, Wi. 53214 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Conduit - Ethics ID# _____		50	50
3-31-16	Tamara Maddente 2515 E. Menlo Blvd. Shorewood, Wi. 53211 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Conduit - Ethics ID# _____		50	50
3-31-16	Michael Ruzicka W73N410 Greystone Dr. Cedarburg, Wi. 53012 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Conduit - Ethics ID# _____		50	50
3-31-16	Kelamar A. Svoboda 4928 W. Tumble Creek Dr. Franklin, Wi. 53132 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Conduit - Ethics ID# _____		50	50
3-28-16	Carol Adam 9220 W. Coldspring Rd. Greenfield, Wi. 53228 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		20	20

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 570	570
TOTAL ITEMIZED CONTRIBUTIONS	\$ 870	870
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$ 870	870

Complete Committee Name
Friends of Staskunas

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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
3-28-16	Jim & Kathy Hotson 3563 S. Hamilton Ct. Milwaukee, Wi. 53220		50	50
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
3-28-16	Steve & Lynn Szydel 13460 Sunburst Ct. New Berlin, Wi. 53151		100	100
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
4-9-16	William R. Drew 1800 N. 60th St. Milwaukee, Wi. 53208		50	50
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
4-25-16	James & Terry Hardacre 5910 NE 14th Rd. Ft. Lauderdale, Fl. 33334		100	100
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 300	300
TOTAL ITEMIZED CONTRIBUTIONS	\$ 870	870
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$870	870

ADDITIONAL DISCLOSURE
Loans
Individual, Committee or Commercial.

Complete Committee Name
Friends of Staskunas

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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
12/29/15	Tony Staskunas 2010 S. 103rd Ct. West Allis, Wi. 53227	1,700.00	3,000.00	--	4,700.00

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
	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
	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 **\$3,000.00**

TOTAL OUTSTANDING LOANS **\$4,700.00**