

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

MILWAUKEE COUNTY
ELECTION COMMISSION

Is This Report an Amendment: Yes No

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

2017 AUG -3 P 12:51

COMMITTEE IDENTIFICATION

Name of Committee

FRIENDS OF DAN SEBRING

Street Address

600 S W. HOWARD AVE

City, State and Zip Code

MILWAUKEE, WI 53220

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 _____
 July Continuing _____ Pre-Election 2016 Spring Fall Special Termination Report
 September Continuing _____ *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	\$ 2551.34	\$ 2551.34
1B. Contributions from Committees (Transfers-In)	\$ 1390.00	\$ 1390.00
1C. Other Income and Commercial Loans	\$	\$
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 3941.34	\$ 3941.34
2. DISBURSEMENTS		
2A. Gross Expenditures	\$ 3852.68	\$ 3852.68
2B. Contributions to Committees (Transfers-Out)	\$	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 3852.68	\$ 3852.68

CASH SUMMARY

Cash Balance Beginning of Report	\$ 0
Total Receipts	\$ 3941.34
Subtotal	\$ 3941.34
Total Disbursements	\$ 3852.68
CASH BALANCE END OF REPORT	\$ 88.66
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 DAN SEBRING	Signature of Candidate or Treasurer <i>D. Sebring</i>	Date: 08/03/17
	Email: dan@dansebring.com	Daytime Phone: 464-397-9577

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.

Contributions (Including Loans) From Individuals

Complete Committee Name
FRIENDS OF DAN SEBRING

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
12/15/15	DAN SEBRING 3919 S. 60TH ST. MILWAUKEE, WI. 53220 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	OWNER, SEBRING GARAGE	200.00	200.00
2/2/16	PETER GILBERT 4863 N. IRIQUOIS NE GLENDALE, WI 53217 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		50.00	50.00
2/7/16	MICHAEL STRAUMANN 7220 HILLCREST DR WAUWATOSA, WI 53213 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	PMO DIRECTOR	200.00	200.00
2/9/16	PATRICK PRUDLOW 2928 W FOREST HOME AVE MILWAUKEE, WI. 53213 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		50.00	50.00
2/10/16	GLENN FRANKOVIS 7008 W CRAWFORD AVE MILWAUKEE, WI 53220 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		100.00	100.00
2/18/16	JOHN ALBRECHT 3766 S. 60TH ST #1 MILWAUKEE, WI. 53220 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		25.00	25.00
2/18/16	WILLIAM LICHTER 4910 DOUGLAS AVE RACINE, WI, 53402 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		25.00	25.00

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 650.00 650.00

TOTAL ITEMIZED CONTRIBUTIONS

\$

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$

Complete Committee Name
Friends of Dan Scharke

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
2/1/16	DAN SCHARKE 3914 S. 6 th ST MILWAUKEE, WI 53220	OWNER, SEBASTIAN GARAGE	500.00	750.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
2/17/16	JAMES McFALLAND 1633 NORTH PROSPECT AVE UNIT 17A MILWAUKEE, WI 53202	ATTORNEY	100.00	100.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
2/17/16	RONNIE SPINDELL 1626 NORTH PROSPECT AVE MILWAUKEE, WI 53202	REAL ESTATE	100.00	100.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
3/1/16	JAMES McFALLAND 1633 NORTH PROSPECT AVE MILWAUKEE, WI 53202	ATTORNEY	150.00	250.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
3/1/16	RONNIE SPINDELL 1626 NORTH PROSPECT AVE MILWAUKEE, WI 53202	REAL ESTATE	50.00	150.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
3/3/16	CHRISTOPHER WILKEN 5660 S. 29 th ST MILWAUKEE, WI 53221	GENERAL MANAGER	250.00	250.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
3/2/16 3/2/16	LJ SCHMIDT 9035 WEST MOUNT VERNON MILWAUKEE, WI 53222		25.00	25.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$	1175.00	11375.00
TOTAL ITEMIZED CONTRIBUTIONS	\$		
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$		
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$		

SCHEDULE 1-A

RECEIPTS

Contributions (Including Loans) From Individuals

Complete Committee Name
Friends of Dan Severson

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
2/14/16	JENNIFER HOUTER 5710 CAMBRIDGE LN, UNIT 5 MILWAUKEE, WI 53426		50.00	50.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
3/14/16	ROSE SPANGLER 8012 S. 68TH ST FRANKLIN, WI 53132		50.00	50.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
3/14/16	DAN PRINCEMONT 2277 Highway K WATSON, WI 53027		99.00	99.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
3/20/16	DON CARLSON P.O. Box 20960 GREENFIELD, WI 53220		50.57	50.57
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
3/21/16	MICHAEL COLLINS 4439 S. 73RD ST GREENFIELD, WI 53221		25.00	25.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
3/21/16	JAMES McFARLAND 1633 NORTH PROSPER AVE MILWAUKEE, WI 53202	ATTORNEY	50.00	300.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
2/18/16	SHELLEY FACILON W 309 N 4098 LAKELAND DR NASHOTWA, WI. 53055		50.00	50.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 374.57

TOTAL ITEMIZED CONTRIBUTIONS

\$ 2199.57

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$ 351.77

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ 2551.34

SCHEDULE 1-B

RECEIPTS
Contributions from Committees
(Transfers-In)

Complete Committee Name
 Friends of Dan Sereno

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

Date	Full Name of Committee, Mailing Address and Zip Code	Amount of Contribution
2/17/16	4th Congressional District 1633 North Prospect Ave Unit 17A MILWAUKEE, WI 53202 Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan	250.00
3/1/16	4th Congressional District 1633 North Prospect Ave Unit 17A MILWAUKEE, WI 53202 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	150.00
3/14/16	Friends of Mike Kucinski W156 S7262 Quietman Drive MUSKEGO, WI 53150 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	300.00
3/14/16	Sanfilippo Fire Assembly 12024 West Euclid Ave West Allis, WI 53227 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	200.00
3/21/16	4th Congressional District 1633 North Prospect Ave Unit 17A MILWAUKEE, WI 53202 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	490.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE		\$ 1,390.00
TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES		\$ 1,390.00

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name

Friends of Dan Siskind

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
2/16/16	<i>CARDINAL PRINT GROUP</i> Check if: <input type="checkbox"/> In-Kind Offset	<i>PRINT ADJUSTMENT / MAIL</i>	<i>621.99</i>
2/16/16	<i>JESSICA STRAUSSMAN</i> <i>7220 HILLCREST DRIVE</i> <i>WAUNTON, WA 98293</i> Check if: <input type="checkbox"/> In-Kind Offset	<i>CAMPAIGN BUTTONS</i>	<i>95.75</i>
3/15/16	<i>DAI PRINT SERVICES</i> Check if: <input type="checkbox"/> In-Kind Offset	<i>YARD SIGNS</i>	<i>304.74</i>
3/16/16	<i>THE PACIFIC HOUSE</i> Check if: <input type="checkbox"/> In-Kind Offset	<i>FUNDRAISER</i>	<i>275.06</i>
3/16/16	<i>FRIDAYS FINEST RUN</i> Check if: <input type="checkbox"/> In-Kind Offset	<i>CAMPAIGN LUNCH</i>	<i>61.00</i>
3/12/16	<i>CAMPAIGN NOW</i> Check if: <input type="checkbox"/> In-Kind Offset	<i>PHONE CALLS, TELEPHONE BANK</i>	<i>437.00</i>
3/18/16	<i>OFFICE DEPOT</i> Check if: <input type="checkbox"/> In-Kind Offset	<i>OFFICE SUPPLIES</i>	<i>124.23</i>
3/18/16	<i>OFFICE MAX</i> Check if: <input type="checkbox"/> In-Kind Offset	<i>LIT CAMP SUPPLIES</i>	<i>254.61</i> <i>254.61</i>

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE \$ *2177.78*

TOTAL ITEMIZED EXPENDITURES \$

TOTAL UNITEMIZED EXPENDITURES \$

TOTAL EXPENDITURES \$

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name
Friends of Dan Stewart

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
3/22/16	THE FAUN Check if: <input type="checkbox"/> In-Kind Offset	LUCKY FOR VOLUNTEERS AFTER LIT MEET	85.65
3/23/16	GFS Check if: <input type="checkbox"/> In-Kind Offset	FOOD FOR EDUCATION	63.83
3/25/16	EB WISCONSIN DEMOCRATS Check if: <input type="checkbox"/> In-Kind Offset	GOP DINNER EVENT	172.76
3/25/16	SAND CLUB Check if: <input type="checkbox"/> In-Kind Offset	ELECTION PARTY SUPPLIES + FOOD	784.07
3/28/16	JENICA STRANDBERG Check if: <input type="checkbox"/> In-Kind Offset	REIMBURSEMENT EXPENSES FOR EMPLOYEE	152.00
4/5/16	SAND CLUB Check if: <input type="checkbox"/> In-Kind Offset	ELECTION PARTY FOOD	145.53
4/5/16	SEGO HALL Check if: <input type="checkbox"/> In-Kind Offset	ELECTION NIGHT MISC	24.00
4/5/16 4/5/16	GFS Check if: <input type="checkbox"/> In-Kind Offset	ELECTION NIGHT FOOD	33.00

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE \$ 1,464.64

TOTAL ITEMIZED EXPENDITURES \$

TOTAL UNITEMIZED EXPENDITURES \$

TOTAL EXPENDITURES \$

Complete Committee Name

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
4/5/16	Check # 10 A Check if: <input type="checkbox"/> In-Kind Offset	Election Night Fun	210.66
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 210.66
TOTAL ITEMIZED EXPENDITURES	\$
TOTAL UNITEMIZED EXPENDITURES	\$
TOTAL EXPENDITURES	\$ 3,852.68