

**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.

2016 MAR 28 A 10:26

COMMITTEE IDENTIFICATION

Name of Committee

FRIENDS of JOHN F. WEISHAN JR.

Street Address

2605 So. 82nd Street.

City, State and Zip Code

WEST Allis, WI. 53219

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

July Continuing Pre-Election 2016 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	\$ 1,713.78	\$ 1,713.78
1B. Contributions from Committees (Transfers-In)	\$ 500.00	\$ 500.00
1C. Other Income and Commercial Loans	\$ - 0 -	\$ - 0 -
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 2,213.78	\$ 2,213.78

2. DISBURSEMENTS

2A. Gross Expenditures	\$ 613.78	\$ 613.78
2B. Contributions to Committees (Transfers-Out)	\$ - 0 -	\$ - 0 -
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 613.78	\$ 613.78

CASH SUMMARY

Cash Balance Beginning of Report	\$ 92.70
Total Receipts	\$ 2,213.78
Subtotal	\$ 2,306.48
Total Disbursements	\$ 613.78
CASH BALANCE END OF REPORT	\$ 1,692.70
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ - 0 -
LOANS (Balance at the Close of This Period-3B)	\$ 7,437.67

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

John F. Weishan Jr.

Signature of Candidate or Treasurer

Date: 3/28/2016

Daytime Phone: (414) 278-4255

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.

GAB-2L (Rev. 12/09) This form is prescribed by the Government Accountability Board. Completed forms must be filed with your local clerk.

Complete Committee Name
FRIENDS OF JOHN F. WEISHAN JR.

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
3/7/16	LAWRENCE M. HOFFMAN 1225 E. WRIGHT ST. #1 MILWAUKEE, WI. 53212		\$ 25.00	25.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
3/7/16	MARGARET A. GIBBS-ZAUTKE 3162 So. 42nd St. MILWAUKEE, WI. 53215		50.00	50.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
3/7/16	PATRICK J. KELHOE 3455 So. 83 St. MILWAUKEE, WI. 53219		25.00	25.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
3/7/16	CHRISTOPHER LIEBENTHAL 2136 So. 95 St. WESTALLIS, WI. 53227		50.00	50.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
3/7/16	LINDA LIEBENTHAL 2136 So. 95 St. WESTALLIS, WI. 53227		50.00	50.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
3/7/16	ANNABELLE WEISHAN 7901 W. NATIONAL AVE. WEST ALLIS, WI. 53214	Retired	200.00	200.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
3/7/16	KAREN M. ORDINANS 10300 W. Spring Green Rd. GREENFIELD, WI. 53228	EXECUTIVE DIRECTOR CHILDRENS HEALTH ALLIANCE WI. 6787 W. WASHINGTON ST. SUITE 1111 WESTALLIS, WI. 53214	300.00	300.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
3/11/16	PAUL W. NANNIS 1858 N. 68th Street WAUNATOSA, WI. 53213		40.00	40.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 740.00

TOTAL ITEMIZED CONTRIBUTIONS

\$

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS

\$ -0-

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$

Complete Committee Name
FRIENDS OF JOHN F. WEISHAN JR.

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
3/7/16	DEAN MOORE 5643 N. 69 ST. MILWAUKEE, WI. 53218		\$ 20.00	20.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
3/7/16	DAVE DELLIORE 3590 SO. 44 TH STREET GREENFIELD, WI. 53220		50.00	50.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
3/7/16	KATHLEEN DELLIORE 3590 SO. 44 TH STREET GREENFIELD, WI. 53220		50.00	50.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
3/7/16	DAVID EISNER 10621 W. LINCOLN AVE. #17-#1 WEST ALLIS, WI. 53227		25.00	25.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
3/7/16	KEVIN SCHOOTS 3675 SO. RIVERSHIRE DR. GREENFIELD, WI. 53228		50.00	50.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
3/7/16	KIM JACOB W1318 COUNTY RD D OCONOMOWOC, WI 53066		100.00	100.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
3/7/16	MICHAEL J. WEISHAN 3590 SO. 44 TH ST. GREENFIELD, WI. 53220		25.00	25.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
3/7/16	EVAN WEISHAN 3613 SO. 87 TH ST. MILWAUKEE, WI 53227		40.00	40.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE \$ 360.00

TOTAL ITEMIZED CONTRIBUTIONS \$

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS \$ -0-

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS \$

Contributions (Including Loans) From Individuals

Complete Committee Name
Friends of John F. Weishan Jr.

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
2/27/16	John F. Weishan Jr. 2605 So. 82nd St. West Allis, WI. 53219	CANDIDATE. (LOAN) MILWAUKEE COUNTY 901 NORTH 9TH STREET MILWAUKEE, WI. 53233	613.78	613.78
	Check if: <input type="checkbox"/> In-Kind <input checked="" 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: _____		
/ /				
	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	\$ 613.78
TOTAL ITEMIZED CONTRIBUTIONS	\$ 1,713.78
TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS	\$ - 0 -
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$ 1,713.78

SCHEDULE 1-B

RECEIPTS
Contributions from Committees
(Transfers-In)

Complete Committee Name
FRIENDS OF JOHN F. WEISHAN JR.

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
3/14/16	AMERICAN FEDERATION OF TEACHERS LOCAL 212 COPE WISCONSIN S.E.B. 739 W. JUNEAU AVE. MILWAUKEE, WI. 53233	200.00	200.00
3/11/16	SERVICE EMPLOYEE INT'L UNION WISCONSIN STATE COUNCIL POLITICAL ACTION COMMITTEE 600 W. VIRGINIA ST MILWAUKEE, WI. 53204	300.00	300.00
/ /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE		\$ 500.00	
TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES		\$ 500.00	

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name
FRIENDS of JOHN F. WEISHAN Jr.

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
2/27/16	MAISTELMAN + ASSOCIATES 8989 N. Port Washington Rd. MILWAUKEE, WI. 53217 Check if: <input type="checkbox"/> In-Kind Offset	Legal SERVICES	350.00
2/26/16	CITY WEST ALLIS 7525 W. GREENFIELD AVE. WEST ALLIS, WI. 53214 Check if: <input type="checkbox"/> In-Kind Offset	Poll List	30.00
2/27/16	OFFICE DEPOT STORE 6175 10707 W. CLEVELAND AVE. WEST ALLIS, WI. Check if: <input type="checkbox"/> In-Kind Offset	office supplies (Labels)	12.13
2/29/16	UNITED STATES POST OFFICE 7440 W. GREENFIELD AVE. WEST ALLIS, WI. Check if: <input type="checkbox"/> In-Kind Offset	STAMPS	115.15
3/01/16	OFFICE DEPOT STORE 6175 10707 W. CLEVELAND AVE. WEST ALLIS, WI. Check if: <input type="checkbox"/> In-Kind Offset	office supplies (INK)	57.50
3/02/16	UNITED STATES POST OFFICE 7440 W. GREENFIELD AVE. WEST ALLIS, WI. Check if: <input type="checkbox"/> In-Kind Offset	STAMPS	49.00
/ /	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 \$ 613.78

TOTAL ITEMIZED EXPENDITURES \$ 613.78

TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS \$ - 0 -

TOTAL EXPENDITURES \$ 613.78

ADDITIONAL DISCLOSURE
Loans
Individual, Committee or Commercial

Complete Committee Name
FRIENDS OF JOHN F. WEISHAN JR.

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>2/27/16</u>	<u>JOHN F. WEISHAN JR</u> <u>2605 SO. 82nd STREET</u> <u>WESTALLIS, WI. 53219</u>	<u>6,823.89</u>	<u>613.78</u>	<u>- 0 -</u>	<u>7,437.67</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	\$ <u>7,437.67</u>
TOTAL OUTSTANDING LOANS	\$ <u>7,437.67</u>