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CAMPAIGN FINANCE REPORT  
LOCAL COMMITTEES OF WISCONSIN

Is This Report an Amendment:  Yes  No

MILWAUKEE COUNTY  
ELECTION COMMISSION

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

2016 FEB -8 A 8: 26

COMMITTEE IDENTIFICATION

Name of Committee  
Citizens for Joseph Thomas Klein

Street Address  
3425 N. Bartlett Ave.

City, State and Zip Code  
Milwaukee, WI 53211

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 \_\_\_\_\_
- July Continuing \_\_\_\_\_
- September Continuing \_\_\_\_\_
- Pre-Primary *2016*
- Pre-Election \_\_\_\_\_
- 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	\$ 234.98	\$ 234.98
1B. Contributions from Committees (Transfers-In)	\$ -	\$ -
1C. Other Income and Commercial Loans	\$ -	\$ -
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)	\$ 234.98	\$ 234.98

2. DISBURSEMENTS

2A. Gross Expenditures	\$ 234.98	\$ 234.98
2B. Contributions to Committees (Transfers-Out)	\$ -	\$ -
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	\$ 234.98	\$ 234.98

CASH SUMMARY

Cash Balance Beginning of Report	\$ 145.00
Total Receipts	\$ 234.98
Subtotal	\$ 379.98
Total Disbursements	\$ 234.98
<b>CASH BALANCE END OF REPORT</b>	\$ 145.00
<b>INCURRED OBLIGATIONS</b> (Balance at the Close of This Period-3A)	\$ -
<b>LOANS</b> (Balance at the Close of This Period-3B)	\$ -

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 MaryJo Klein	Signature of Candidate or Treasurer  Email: mjklein@wipp.coop	Date: 2/7/16 Daytime Phone: 414-628-3381
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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.

**Contributions (Including Loans) From Individuals**

Complete Committee Name  
Citizens for Joseph Thomas Klein

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
1/5/16	Joseph Thomas Klein 3425 N. Bartlett Ave, Milwaukee, WI 53211	Consultant	18.78	18.78
	Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	_____		
1/15/16	Joseph Thomas Klein 3425 N. Bartlett Ave, Milwaukee, WI 53211	Consultant	175.00	193.78
	Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	_____		
1/16/16	Joseph Thomas Klein 3425 N. Bartlett Ave Milwaukee, WI 53211	Consultant	35.67	229.45
	Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	_____		
1/16/16	Joseph Thomas Klein 3425 N. Bartlett Ave, Milwaukee, WI 53211	Consultant	5.53	234.98
	Check if: <input checked="" 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	\$ 234.98	234.98
TOTAL ITEMIZED CONTRIBUTIONS	\$ 234.98	234.98
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$ 234.98	234.98

**SCHEDULE 2-A**

**DISBURSEMENTS**  
Gross Expenditures

Complete Committee Name  
*Citizens for Joseph Thomas Klein*

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
<i>1/5/16</i>	<i>Fed Ex Office 1703 N. Farwell Ave, Milwaukee, WI 53209</i> Check if: <input checked="" type="checkbox"/> In-Kind Offset	<i>Administrative office expense</i>	<i>18.78</i>
<i>1/15/16</i>	<i>Kingfisher LLC 2112 N. Palmer St. Milwaukee, WI 53212</i> Check if: <input checked="" type="checkbox"/> In-Kind Offset	<i>Advertisement</i>	<i>175.00</i>
<i>1/16/16</i>	<i>Office Depot 362 E. Capitol Dr. Milwaukee, WI 53212</i> Check if: <input checked="" type="checkbox"/> In-Kind Offset	<i>Printing and paper</i>	<i>35.67</i>
<i>1/16/16</i>	<i>Clark Graphics 2915 N. Oakland Ave, Milwaukee, WI 53211</i> Check if: <input checked="" type="checkbox"/> In-Kind Offset	<i>Scan and print documents</i>	<i>5.53</i>
	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 \$ *229.45*

TOTAL ITEMIZED EXPENDITURES \$ *229.45*

TOTAL UNITEMIZED EXPENDITURES \$ *5.53*

TOTAL EXPENDITURES \$ *234.98*