

**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.

**COMMITTEE IDENTIFICATION**

Name of Committee

*Friends of Steve F. Taylor*

Street Address

*2812 W Hilltop Lane*

City, State and Zip Code

*Franklin WI 53132*

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 12             Pre-Primary \_\_\_\_\_  
 July Continuing \_\_\_\_\_             Spring             Fall             Special             Termination Report  
 September Continuing \_\_\_\_\_             Pre-Election \_\_\_\_\_            *also complete Schedule 4*

**SUMMARY OF RECEIPTS AND DISBURSEMENTS**

	Column A This Period	Column B Calendar Year-To-Date
<b>1. RECEIPTS</b>		
1A. Contributions (Including Loans) from Individuals	\$ 0	\$ 6037
1B. Contributions from Committees (Transfers-In)	\$ 300	\$ 800
1C. Other Income and Commercial Loans	\$ 0	\$ 0
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)	\$ 300	\$ 6837
<b>2. DISBURSEMENTS</b>		
2A. Gross Expenditures	\$ 0	\$ 5759.94
2B. Contributions to Committees (Transfers-Out)	\$ 0	\$ 0
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	\$ 0	\$ 5759.94

**CASH SUMMARY**

Cash Balance Beginning of Report	\$ 3495.35
Total Receipts	\$ 300
Subtotal	\$ 3795.35
Total Disbursements	\$ 0
<b>CASH BALANCE END OF REPORT</b>	\$ 3795.35
<b>INCURRED OBLIGATIONS</b> (Balance at the Close of This Period-3A)	\$ 0
<b>LOANS</b> (Balance at the Close of This Period-3B)	\$ 3000

*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	Signature of Candidate or Treasurer	Date:
<i>Steve F. Taylor</i>	<i>[Signature]</i>	<i>7-20-17</i>
	Email <i>SteveTaylor@wisconsincongress.com</i>	Daytime Phone: <i>278-4267</i>

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.