

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

MILWAUKEE COUNTY
ELECTION COMMISSION

Is This Report an Amendment: Yes No

2017 JUL 14 P 12:15

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

COMMITTEE IDENTIFICATION

Name of Committee

FRIENDS OF TIMOTHY J JOHNSON

Street Address

31635 S RIVERSHIRE DR. APT 8

City, State and Zip Code

GREENFIELD, WI 53228

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 2017 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
1. RECEIPTS		
1A. Contributions (Including Loans) from Individuals	\$ 0	\$ 0
1B. Contributions from Committees (Transfers-In)	\$ 0	\$ 0
1C. Other Income and Commercial Loans	\$ 0	\$ 0
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 0	\$ 0
2. DISBURSEMENTS		
2A. Gross Expenditures	\$ 666.60	\$ 666.60
2B. Contributions to Committees (Transfers-Out)	\$ 0	\$ 0
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 666.60	\$ 666.60

CASH SUMMARY

Cash Balance Beginning of Report	\$ 128.22 ✓
Total Receipts	\$ 0.00
Subtotal	\$ 128.22
Total Disbursements	\$ 666.60
CASH BALANCE END OF REPORT	\$ 61.62
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	Signature of Candidate or Treasurer	Date:
Laurie M Buss	Laurie M Buss	07/13/17
	Email: stamper.laurie@gmail.com	Daytime Phone: 414-403-3687

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.

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name
FRIENDS OF TIMOTHY J JOHNSON

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Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
02/16/17	CRAIGSLIST.ORG 222 SUTTER ST. 9th Floor SAN FRANCISCO, CA 94108-4460 Check if: <input checked="" type="checkbox"/> In-Kind Offset	Advertising	25.00
05/17/17	OFFICE DEPOT / OFFICE MAX 10707 W CLEVELAND AVE WEST ALLIS, WI 53227 Check if: <input checked="" type="checkbox"/> In-Kind Offset	OFFICE SUPPLIES	11.61
06/01/17	FACEBOOK INC. PO BOX 10005 PALO ALTO, CA 94303 Check if: <input checked="" type="checkbox"/> In-Kind Offset	CAMPAIGN PROMOTION	29.99
	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 \$ 66.60

TOTAL ITEMIZED EXPENDITURES \$ 66.60

TOTAL UNITEMIZED EXPENDITURES \$ 0.00

TOTAL EXPENDITURES \$ 66.60