

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

WISCONSIN ETHICS COMMISSION
REC'D 1/16/18 12:45

WISCONSIN ETHICS COMMISSION
REC'D 1/16/18 12:45

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 Peggy West

Street Address
2512 W. Greenfield Ave.

City, State and Zip Code
Milw WI 53204

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 *2018* Pre-Primary _____

July Continuing _____ Spring Fall Special

September Continuing _____ Pre-Election _____

Termination Report
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	\$ <i>1480.00</i>	\$ <i>1480.00</i>
1B. Contributions from Committees (Transfers-In)	\$	\$
1C. Other Income and Commercial Loans	\$	\$
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$	\$
2. DISBURSEMENTS		
2A. Gross Expenditures	\$ <i>1308.25</i>	\$ <i>1308.25</i>
2B. Contributions to Committees (Transfers-Out)	\$	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$	\$

CASH SUMMARY

Cash Balance Beginning of Report	\$ <i>875.19</i>
Total Receipts	\$ <i>1480.00</i>
Subtotal	\$ <i>2355.19</i>
Total Disbursements	\$ <i>1308.25</i>
CASH BALANCE END OF REPORT	\$ <i>1046.94</i>
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$
LOANS (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 <i>Jay Reink</i>	Signature of Candidate or Treasurer <i>Jay Reink</i>	Date: <i>1-16-18</i>
	Email: <i>jay@milwaukee-labor.org</i>	Daytime Phone: <i>414-271-7070</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.

Complete Committee Name
Friends of Peggy West

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
10/10/17	Antonia Baptista 1946 S 21st Milw WI 53204 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		25-	25-
10/10/17	Ray Gray 4763 N. 39th St Milw WI Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		20-	20-
11/8/17	Kevin Schoofs 3675 S. Rivershore Dr Greenfield WI Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	Retired	25	25-
11/8/17	Nancy Bush 1981 S. Summit Ave Milw WI 53202 #304 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	Retired	25	25
11/8/17	David Eisner 10621 W. Lincoln Ave. West Allis, WI 53227 #1 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		25	25
11/8/17	Debra Gonzalez 2828 S. 76th St. West Allis, WI 53219 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		40	40
11/8/17	Samer Asad 1888 N. Water St #107 Milw WI 53202 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		100	100

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 260 260

TOTAL ITEMIZED CONTRIBUTIONS

\$ ~~1350.00~~

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ ~~1350.00~~

Contributions (Including Loans) From Individuals

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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
12/6/17	David Eisner 10621 W. Lincoln Ave. West Allis, WI 53227		25-	50-
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
12/6/17	Robert Miranda 5215 S. 29th St. Milw WI 53221		50-	50-
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
12/6/17	Kevin Schoots 3675 S. Riverside Dr. #8 Greenfield WI 53208		50-	75-
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
12/6/17	Emery Herlan 2010 Lachandelle Court Brookfield WI 53005	Lawyer MWH Law Group 735 W. Water St. #610	250-	250-
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
12/6/17	Araceli Arevalo 2228 S. Layton Blvd. Milw WI 53215		20-	20-
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
12/6/17	Nancy Bush 1981 S. Summit Ave. #304 Milw WI 53202		25-	50-
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
12/15/17	Janice Wilberg 3269 N. Summit Ave. Milw WI 53211	Wilberg Community Planning, LLC 3269 N. Summit Ave Milw WI 53211	250-	250
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE			\$ 670	
TOTAL ITEMIZED CONTRIBUTIONS			\$	
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS			\$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS			\$	

Complete Committee Name
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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
12/6/17	Jennie Salar 2019 E. Oklahoma Ave. Milw WI 53007		50-	50-
Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____				
12/15/17	Sally Spranger 1632 W. Edwards Dr. Meyun, NE 53092	Health Administrator Quality Health Care Options 7428 Herwood Ave. Inc. Wauwatosa, WI 53013	500-	500-
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# _____				
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# _____				
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# _____				
Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____				

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 550.00

TOTAL ITEMIZED CONTRIBUTIONS

\$ 1480.00

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ 1480.00

Complete Committee Name
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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
10/6/17	Jay Reinke 2512 W. Greenfield Av. Milw. WI 53204 Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	Printed Envelopes	\$ 132-	\$ 132-
11/8/17	Tres Hermanos 1332 W. Lincoln Ave Milw WI 53215 Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	Food	150-	150-
12/6/17	Tu Casa 3710 W. Lincoln Ave Milw. WI 53215 Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	Food	150	150-
	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#			
	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	\$ 432.00
TOTAL ITEMIZED CONTRIBUTIONS	\$
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name
Friends of Peggy West

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
11/14/17	Walgreens 3293 S 27th E Milw WI 53204 Check if: <input type="checkbox"/> In-Kind Offset	Campaign Supplies	26.67
11/14/17	Act Blue actblue.com Check if: <input type="checkbox"/> In-Kind Offset	On-line setting fees	151.10
11/15/17	Panera Bread 7840 W Dayton Ave Greenfield, WI 53120 Check if: <input type="checkbox"/> In-Kind Offset	Coffee for Volunteers	16.82
11/27/17	USPS Kiosk Check if: <input type="checkbox"/> In-Kind Offset	Stamps	58.80
11/28/17	Dollar Tree 3700 S 27th St Milw WI 53201 Check if: <input type="checkbox"/> In-Kind Offset	Campaign Supplies	13.73
12/18/17	The Factory 1223 S 23rd St Milw WI 53204 Check if: <input type="checkbox"/> In-Kind Offset	T-Shirts	145.00
12/18/17	Weber Printing 3048 N 34th St Milw WI 53210 Check if: <input type="checkbox"/> In-Kind Offset	Yard Signs, Campaign literature	776.16
12/18/17	Peggy West 2133 S. 16th St Milw WI 53215 Check if: <input type="checkbox"/> In-Kind Offset	Reimbursement for Office Supplies	114.95

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 1303.25
TOTAL ITEMIZED EXPENDITURES	\$
TOTAL UNITEMIZED EXPENDITURES	\$
TOTAL EXPENDITURES	\$ 1303.25

Complete Committee Name
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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
12/14/17	US Bank Check if: <input type="checkbox"/> In-Kind Offset	Analysis Service Fee	5.00
	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

\$ 5.00

TOTAL ITEMIZED EXPENDITURES

\$

TOTAL UNITEMIZED EXPENDITURES

\$

TOTAL EXPENDITURES

\$ 1308.25