

4

CAMPAIGN FINANCE REPORT WISCONSIN LOCAL COMMITTEE			
Is this report an Amendment?		YES	X NO
COMMITTEE IDENTIFICATION			
Name of Committee	Elect Scott Manske		
Address	611 N 76th St		
City, State, ZIP	Wauwatosa, WI 53213		
OFFICE USE ONLY			
Please check if address is different than previously reported <input type="checkbox"/>			
NAME OF REPORT	<input checked="" type="checkbox"/> Jan 2019 Continuing	<input type="checkbox"/> Pre-Primary 20__	<input type="checkbox"/> Spring
	<input type="checkbox"/> July 2019 Continuing	<input type="checkbox"/> Pre-election 20__	<input type="checkbox"/> Fall
			<input type="checkbox"/> Special
			<input type="checkbox"/> Special
SUMMARY OF RECEIPTS AND DISBURSEMENTS			
	Column A This Period	Column B YTD	Audited Totals Office Use Only
1. RECEIPTS			
A. Contributions including Loans from Individuals	\$ -	\$ -	
B. Contributions from Committees (Transfers-In)	\$ -	\$ -	
C. Other Income and Commercial Loans	\$ -	\$ -	
TOTAL RECEIPTS (Add totals from 1A, 1B, and 1C)	\$ -	\$ -	
2. DISBURSEMENTS			
A. Gross Expenditures	\$ 2.00	\$ 701.65	
B. Contributions to Committees (Transfers-Out)	\$ -	\$ -	
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 2.00	\$ 701.65	
CASH SUMMARY			
Cash Balance at Beginning of Report	\$ 17,202.10		
Total Receipts	\$ -		
Subtotal	\$ 17,202.10		
Total Disbursements	\$ 2.00		
CASH BALANCE AT END OF REPORT	\$ 17,200.10		
INCURRED OBLIGATIONS (at close of period)	\$ -		
LOANS (at close of period)	\$ 10,259.35		
<i>I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.</i>			
Type or Print Name of Candidate or Treasurer Scott B. Manske	Signature of Candidate or Treasurer 	Date 01/15/19	
	Email smanske4@att.net	Daytime Phone 414-399-9577	

4

NOTE: The information on this form is required by ss. 11.06, 11.20, Wis. Stats.
Failure to provide this information may subject you to the penalties of ss.11.60, 11.61, Wisconsin Stats.

Print the completed report and file with your local clerk or election commission by the filing deadline.
GAB-2L (04/14)

Schedule 2-A

Complete Committee Name		Elect Scott Manske	
Date	Full Name, Mailing Address and Zip Code of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
12/14/18	BMO Harris Bank N.A. PO Box 94033 Palantine, IL 60094	Bank Fee	\$ 2.00
	In Kind Offset	<input type="checkbox"/>	
	In Kind Offset	<input type="checkbox"/>	
	In Kind Offset	<input type="checkbox"/>	
	In Kind Offset	<input type="checkbox"/>	
	In Kind Offset	<input type="checkbox"/>	
	In Kind Offset	<input type="checkbox"/>	
	In Kind Offset	<input type="checkbox"/>	
	In Kind Offset	<input type="checkbox"/>	
	In Kind Offset	<input type="checkbox"/>	
	In Kind Offset	<input type="checkbox"/>	
	In Kind Offset	<input type="checkbox"/>	

Subtotal Itemized Expenditures this page \$ 2.00
 Total Itemized Expenditures \$ 2.00
 Total Unitemized Expenditures \$20 or Less \$ -
 Total Expenditures \$ 2.00

Loans
Individual, Committee or Commercial
ADDITIONAL DISCLOSURE

Complete Committee Name
Elect Scott Manske

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

	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
Date 2/31/18	Scott Manske 611 N 76th St. Wauwatosa, WI 53213	10,259.35			10,259.35

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
Date / /					

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
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	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
Date / /					

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Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

SUBTOTAL OUTSTANDING LOANS THIS PAGE \$ 10,259.35

TOTAL OUTSTANDING LOANS \$ 10,259.35