

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

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Is This Report an Amendment: Yes No

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

COMMITTEE IDENTIFICATION

Name of Committee
Martin for Milwaukee

Street Address
4629 W Scranton Pl

City, State and Zip Code
Milwaukee, WI 53216

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 2019 Pre-Primary _____
 July Continuing _____ Spring Fall Special
 September Continuing _____ Pre-Election _____
 Termination Report
also complete Schedule 4

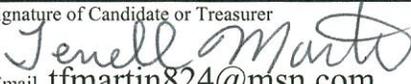
SUMMARY OF RECEIPTS AND DISBURSEMENTS

	Column A This Period	Column B Calendar Year-To-Date
1. RECEIPTS		
1A. Contributions (Including Loans) from Individuals	\$ 100.00	\$ 100.00
1B. Contributions from Committees (Transfers-In)	\$	\$
1C. Other Income and Commercial Loans	\$.07	\$.07
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 100.07	\$ 100.07
2. DISBURSEMENTS		
2A. Gross Expenditures	\$ 0	\$ 0
2B. Contributions to Committees (Transfers-Out)	\$ 0	\$ 0
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 0	\$ 0

CASH SUMMARY

Cash Balance Beginning of Report	\$ 136.00
Total Receipts	\$ 100.07
Subtotal	\$
Total Disbursements	\$ 0
CASH BALANCE END OF REPORT	\$ 236.07
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$
LOANS (Balance at the Close of This Period-3B)	\$ 2900.00

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 Terrell Martin	Signature of Candidate or Treasurer 	Date: 1-8-2019
	Email: tfmartin824@msn.com	Daytime Phone: 414-758-1261

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.

RECEIPTS
Contributions (Including Loans) From Individuals

Complete Committee Name **Martin for Milwaukee**

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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
12/6/2018	Tammy Bockhorst 4304 N Murray Ave Shorewood, WI 53211 Check if: <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____	N/A	\$100.00	
	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	\$ 100.00	100.00
TOTAL ITEMIZED CONTRIBUTIONS	\$	
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$ 100.00	100.00

**Loans
Individual, Committee or Commercial
ADDITIONAL DISCLOSURE**

Complete Committee Name
Martin for Milwaukee

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Date 1 / 8 / 19	Full Name, Mailing Address and Zip Code of Loan Source Felesia Martin 4629 W Scranton Pl Milwaukee, WI 53216	Outstanding Obligations Beginning of This Period \$2900.00	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period \$2900.00
	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 \$

Date / /	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
	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 \$

Date / /	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
	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 \$

SUBTOTAL OUTSTANDING LOANS THIS PAGE	\$ 2900.00
TOTAL OUTSTANDING LOANS	\$ 2900.00