

SCHEDULE 1-A

RECEIPTS

Contributions (Including Loans) From Individuals

Complete Committee Name
Friends of Suliza - Ortiz - Velez

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
1/23/19	Steven P Shea 3666 W Armour	Milwaukee County Supervisor Teacher at Mate	25	25
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
1/23/19	Victor Huyke 4531 W Foresthome Milw, WI 53220	Owner of El Conquistador	50	50
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
1/23/19	Carmen Cabrera 1220 W Scott Milw, WI 53204	Employee of Centro Hispano	50	50
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
1/23/19	Hector Colon 4226 W Willowway Milw, WI 53221	President of Lutheran Social Services of Wisconsin.	100	100
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
1/23/19	Anthony Zielinski 2463 S Superior Milw, WI 53207	City of Milwaukee Alderman	300	300
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
1/23/19	Valdemar Escobar 1407 S. 1st St Milw, WI 53204	Restaurant Owner	300	300
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
1/21/19	Oralia Ortiz 2223 S S 9th West Allis, WI 53219	Retired	30	30
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 855

TOTAL ITEMIZED CONTRIBUTIONS

\$

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$

Contributions (Including Loans) From Individuals

Complete Committee Name

Friends of Sylvia Ortiz-Velez

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
2/20/19	Luz Sosa 3071 S. Howel Apt 3 Milw, WI 53207	MATC Teacher	100	100
Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____				
2/20/19	Ra'isa Koltun 815 E Pleasant Milw, WI	Employee of Milwaukee County	100	100
Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____				
4/5/19	Chris Abele	Milwaukee County Executive	1,000	1,000
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

\$ 1200

TOTAL ITEMIZED CONTRIBUTIONS

\$

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ 2055

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name
Friends of Sylvia Ortiz-Velez

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
4/5/19	Act Blue Check if: <input type="checkbox"/> In-Kind Offset	Expense	39.50
2/28/19	Monthly Bank fee Check if: <input type="checkbox"/> In-Kind Offset	Service Fee	5
3/3/19	Monthly Bank fee Check if: <input type="checkbox"/> In-Kind Offset	Service Fee	5
4/29/19	Sylvia Velez 517 W Madison Milw WI 53204 Check if: <input type="checkbox"/> In-Kind Offset	Out standi Loan pay back	49.99
4/30/19	monthly Bank fee Summit Check if: <input type="checkbox"/> In-Kind Offset	monthly fee	5
5/30/19	Monthly Bank fee Check if: <input type="checkbox"/> In-Kind Offset	Monthly Fee	5
6/21	Duango Zerpa 2415 A North Booth Milw WI 53212 Check if: <input type="checkbox"/> In-Kind Offset	Campaign work	200
6/30	Monthly Bank fee Check if: <input type="checkbox"/> In-Kind Offset	Monthly Fee	5

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$	314.49
TOTAL ITEMIZED EXPENDITURES	\$	
TOTAL UNITEMIZED EXPENDITURES	\$	
TOTAL EXPENDITURES	\$	1151.29

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name
Friends of Sylvia Ortiz-Velez

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
1/24/19	Snifters 606 S 5th Street Milw, WI 53204 Check if: <input type="checkbox"/> In-Kind Offset	Fundraiser expense	250
1/26/19	Weber Printing 3048 N 34th Mil, WI 53210 Check if: <input type="checkbox"/> In-Kind Offset	Printed Materials ? Admin fee \$100 added	279.84
1/30/19	Square Check if: <input type="checkbox"/> In-Kind Offset	Scan device	10.56
2/1/19	Sylvia Velez 517 W Madison Avenue Check if: <input type="checkbox"/> In-Kind Offset	Outstanding Loan Payback	\$280
2/26/19	Act Blue Check if: <input type="checkbox"/> In-Kind Offset	Expense for online collection	2.95
2/26/19	Act Blue Check if: <input type="checkbox"/> In-Kind Offset	Expense for online collection	2.95
1/31/19	Bank Fee Summit Check if: <input type="checkbox"/> In-Kind Offset	Monthly fee	5
2/13/19	United Postal Service Check if: <input type="checkbox"/> In-Kind Offset	Postage	5.50

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 836.8
TOTAL ITEMIZED EXPENDITURES	\$
TOTAL UNITEMIZED EXPENDITURES	\$
TOTAL EXPENDITURES	\$

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

Complete Committee Name
Friends of Sylvia Ortiz-Velez

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

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
6/1/11	Sylvia Velez 517 W Madison Milwaukee, WI 53204	1724.71	—	329.99	1394.72

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	\$
TOTAL OUTSTANDING LOANS	\$