

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

Is This Report an Amendment: Yes No

FORM 4000 200415#1249

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

COMMITTEE IDENTIFICATION

Name of Committee
Friends of Staskunas

Street Address
2010 South 103rd Ct.

City, State and Zip Code
West Allis, Wi. 53227

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 2020 Pre-Primary _____
 July Continuing _____ Spring Fall Special
 September Continuing _____ Pre-Election _____
- Termination Report
also complete Schedule 4

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

	Column A This Period	Column B Calendar Year-To-Date
1A. Contributions (Including Loans) from Individuals	\$ 998 0	\$ 4,000.00
1B. Contributions from Committees (Transfers-In)	\$ 0	\$ 0
1C. Other Income and Commercial Loans	\$.93	\$.99
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$.93	\$ 4,000.99

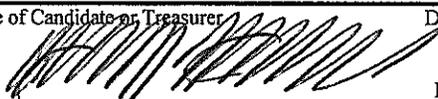
2. DISBURSEMENTS

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	\$ 4,181.78
Total Receipts	\$.93
Subtotal	\$ 4,182.71
Total Disbursements	\$ 0
CASH BALANCE END OF REPORT	\$ 4,182.71
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ 0
LOANS (Balance at the Close of This Period-3B)	\$ 9,300

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 Anthony J. Staskunas	Signature of Candidate or Treasurer 	Date: 1-13-2020
	Email	Daytime Phone: 541-9440

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 Staskunas

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

Date	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
7-5-19	BMO Harris Bank P.O. Box 94033 Palatine, Il. 60094	interest	.05
8-5-19	BMO Harris Bank P.O. Box 94033 Palatine, Il. 60094	interest	.18
9-5-19	BMO Harris Bank P.O. Box 94033 Palatine, Wi. 60094	interest	.18
10-4-19	BMO Harris Bank P.O. Box 94033 Palatine, Il. 60094	interest	.17
11-5-19	BMO Harris Bank P.O. Box 94033 Palatine, Il. 60094	interest	.18
12-5-19	BMO Harris Bank P.O. Box 94033 Palatine, Il. 60094	interest	.17
SUBTOTAL OTHER INCOME THIS PAGE			\$.93
TOTAL ITEMIZED OTHER INCOME			\$.93
TOTAL OTHER INCOME			\$.93

SCHEDULE 3-B

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

Complete Committee Name
Friends of Staskunas

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
1/13/20	Tony Staskunas 2010 South 103rd Ct. West Allis, Wi. 53227	9,300-	0	0	9,300

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	\$ 9,300
TOTAL OUTSTANDING LOANS	\$ 9,300