CAMPAIGN FINANCE REPORT LOCAL COMMITTEES OF WISCONSIN					
Is This Report an Amendment: Yes					
Instructions for completing schedules are on the back					
COMMITTEE IDENTIFICATION	or cach schedule.				
Name of Committee					
french of melan Wasserma.	^				
Name of Committee Friends of Shelden Wasserma. Street Address 3487 N. Lite Osive City, State and Zip Code Mc Wurkee, WI 57211			OF	FICE USE ONLY	
Mchuritee, WI 57211					
Please check if address is different than previously reported, and	complete the Campaign Reg	istration State	ment in the b	ack of this form.	
NAME OF REPORT					
☐ January Continuing ☐ Pre-Primary ☐ July Continuing ☐ Pre-Election Z3Z	Spring 🗀 E	Fall S	Special	Termination Report	
SUMMARY OF RECEIPTS AND	C-I A	0.1			
DISBURSEMENTS	Column A This Period	Colun Caler			
1. RECEIPTS		Year-To	o-Date		
1A. Contributions (Including Loans) from Individuals	\$ 246,05	\$		1.5	
1B. Contributions from Committees (Transfers-In)	\$	\$			
1C. Other Income and Commercial Loans	\$	\$			
TOTAL RECEIPTS (Add totals from IA. IB and IC)	\$	\$			
2. DISBURSEMENTS		·		66	
2A. Gross Expenditures	\$ 592.70	\$			
2B. Contributions to Committees (Transfers-Out)	\$ -	\$			
TOTAL DISBURSEMENTS (Add totals from 2A and 2B) \$ 592, 70 \$					
CASH SUMMARY					
Cash Balance Beginning of Report	\$ 27,332.11				
Total Receipts	\$ 246.05				
Subtotal	\$				
Total Disbursements	\$ 592.70				
CASH BALANCE END OF REPORT	\$ 26,995.46				
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)					
LOANS (Balance at the Close of This Period-3B) \$ 241,777.31					
I cartify that I have overwined this report and to the best of w	brandadaa aud baliafii			###	

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 Shellin A. Walleman	Signature of Cand	lighte of Treasurer	Date: 3/21-/20 Daytime Phone:	414-464-0663
	1	,		- -

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.



DISBURSEMENTS Gross Expenditures

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Complete Compittee Name		7	
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men	λ.I.	Jallon	WISIGMEN
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Instructions for completing schedules are on the back of each schedule. Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Specific Purpose of Expenditure Amount Told Miler
Us murray Hill Consilling
Us murray Hill Consilling
Told Mirray
WE-Are silk 910
Check it: 14 In-Kind Offset Murray
Told Mirray
Told Miler angaina 750,40 1/10 Union Copy Center
6603 W. Whiteheama printing
Check if: I In-Kind Offset MIW 1 WT 57219

Check if: I In-Kind Offset MIW 1 WT 57202

Check if: I In-Kind Offset MIW 1 WT 57202 137.23 1/15 10542 1/15 Check if: In-Kind Offset Check if: U In-Kind Offset Check if: In-Kind Offset Check if: In-Kind Offset Check if: U In-Kind Offset 592.70 SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE **TOTAL ITEMIZED EXPENDITURES** TOTAL UNITEMIZED EXPENDITURES TOTAL EXPENDITURES



RECEIPTS Contributions (Including Loans) From Individuals

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Frence of Stelden Wasseman

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
	Richard C. Shoult			
1/10/20	2131 N. Terrace NR		100.00	
- -	MIW. WE SAZUL	; ; ;	,	
	Check if. Li In-Kind Li Loan Conduit - Ethics ID#			
	ENC Kapha	1		
1/10/20	2323 N. Like Alle	1 1 1 1	96,05	
	milwavkee, wt 53211	; ; ;	10,52	
		1		
	Check if. L In-Kind L Loan Conduit - Ethics ID#			
(115/20	Allan Cavatt			
(11) 1/0	1305 W. WYUNDER AVE		50,00	
	Allan Cavatt 1305 W. WYONAN AVE OCONOMORIOC, UI OCONOMORIOC, UI 05066		,	
	Check if [1] In-Kind [1] Loan Conduit - Ethics ID#			
			:	
	Check if: UIn-Kind ULoan Conduit - Ethics ID#	1		
	CHECK II. E III-KIII E E EDATE CONDUIT - ETITICS IO-			
	,			
	Check if Lin-Kind Li Loan Conduit - Ethics ID#			
		1		
	Check if: [] In-Kind [] Loan[] Conduit – Ethics ID#			
	Check if In-Kind Loan Conduit - Ethics ID#			
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE			s	
		TOTAL ITEMIZED CONTRIBUTIONS	s	
	TOTAL ANOI	NYMOUS CONTRIBUTIONS \$10 OR LESS	3 1/ 00	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS			s 2 46.05	



Loans Individual, Committee or Commercial ADDITIONAL DISCLOSURE

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Complete Committee Name friends of Shilden Wald	erman						
Instructions for completing schedules are on the back of each schedule. Full Name, Mailing Address and Zip/Code of Loan Source Fill Name, Mailing Address and Zip/Code of Loan Source Fill Name, Mailing Address and Zip/Code of Loan Source Full Name, Ma		Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period		
1		241, >77.31	_		21/17777/		
List All Endorsers or Guarantors (if any)							
Full Name, Mailing Address and Zip Code of Guarantor	Occupation	ccupation					
	Amount Guarantee \$	ed Outstanding					
Full Name, Mailing Address and Zip Code of Guarantor	Occupation						
o Soata do	Amount Guarantee	ed Outstanding					
	3						
Full Name, Mailing Address and Zip Code of Loan Sou	I	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)					1		
List All Endoisers of Guarantons (if arry)							
Full Name, Mailing Address and Zip Code of Guarantor	Occupation						
	Amount Guaranter \$	ed Outstanding					
Full Name, Mailing Address and Zip Code of Guarantor	Occupation						
or Georgian	Amount Guarante	Amount Guaranteed Outstanding					
	s						
Full Name, Mailing Address and Zip Code of Loan Sou	ince	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)		l			1		
and All Charles of Countries (I ally)							
Full Name, Mailing Address and Zip Code of Guarantor	Occupation	Occupation					
	Amount Guarante	ed Outstanding					
	S						
Full Name, Mailing Address and Zip Code Occupation of Guaranior		cupation					
Amount Guaranteed Outstanding							
	\$						
		SUBTOTAL O	UTSTANDING LOA	NS THIS PAGE	\$		
			TOTAL OUTSTA	NDING LOANS	\$		