

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

INFO RECD*200806 PM03-45

AC

Is This Report an Amendment: Yes No

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

COMMITTEE IDENTIFICATION

Name of Committee
Citizens for Joe Czarnecki

Street Address
7004 West Van Beck Avenue

City, State and Zip Code
Milwaukee, WI 53220

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 _____ Pre-Primary 2020
 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	\$ 150.00	\$ 150.00
1B. Contributions from Committees (Transfers-In)	\$ -	\$ -
1C. Other Income and Commercial Loans	\$ -	\$ -
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 150.00	\$ 150.00

2. DISBURSEMENTS

2A. Gross Expenditures	\$	\$
2B. Contributions to Committees (Transfers-Out)	\$	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$	\$

CASH SUMMARY

Cash Balance Beginning of Report	\$ 1895.61
Total Receipts	\$ 150.00
Subtotal	\$ 2045.61
Total Disbursements	\$ 846.06
CASH BALANCE END OF REPORT	\$ 1199.55
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ -
LOANS (Balance at the Close of This Period-3B)	\$ -

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 <i>Mary Ann Czarnecki</i>	Signature of Candidate or Treasurer <i>Mary Ann Czarnecki</i>	Date: <i>2/4/2020</i>
	Email: <i>jjmaczar@sbcglobal.net</i>	Daytime Phone: <i>414-545-5609</i>

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.

Contributions (Including Loans) From Individuals

Complete Committee Name
Citizens for Joe Czarnecki

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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
1/29/2020	Lynne Debruin 2909 N 79 St. Milwaukee, WI 53222 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		\$ 50.00	\$ 50.00
2/3/2020	Robert Welch 7252 W. Georgia Ave Milwaukee, WI 53220 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		\$ 100.00	\$ 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# _____			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 150.00	150.00
TOTAL ITEMIZED CONTRIBUTIONS	\$ 150.00	150.00
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$ -	-
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$ 150.00	150.00

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name
Citizens for Joe Czarnecki

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Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
1/20/2020	<i>Union Copy Centers, Inc.</i> <i>6603 W. Oklahoma Ave.</i> <i>Milwaukee, WI 53219</i> Check if: <input type="checkbox"/> In-Kind Offset	<i>Printing</i>	<i>\$663.12</i>
1/24/2020	<i>Office Depot</i> <i>10707 W. Cleveland</i> <i>West Allis, WI 53227</i> Check if: <input type="checkbox"/> In-Kind Offset	<i>Stamps & Office Supplies</i>	<i>\$165.00</i>
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ <i>828.12</i>
TOTAL ITEMIZED EXPENDITURES	\$ <i>828.12</i>
TOTAL UNITEMIZED EXPENDITURES	\$ <i>17.94</i>
TOTAL EXPENDITURES	\$ <i>846.06</i>