

**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

Friends of Andrea Rodriguez for Milwaukee County Supervisor D4

Street Address

2830 S. 12th St.

Type text here

OFFICE USE ONLY

City, State and Zip Code

Milwaukee WI 53215

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	\$ 125.00	\$ 1086.22
1B. Contributions from Committees (Transfers-In)	\$	\$
1C. Other Income and Commercial Loans	\$	\$
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 125.00	\$ 1,086.22

2. DISBURSEMENTS

2A. Gross Expenditures	\$ 232.32	\$ 853.90
2B. Contributions to Committees (Transfers-Out)	\$	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 232.32	\$ 853.90

CASH SUMMARY

Cash Balance Beginning of Report	\$ 425.01
Total Receipts	\$ 232.32
Subtotal	\$ 232.32 192.69
Total Disbursements	\$ 0.00
CASH BALANCE END OF REPORT	\$ 192.69
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ 0.00
LOANS (Balance at the Close of This Period-3B)	\$ 0.00

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

Andrea Rodriguez-Strock

Signature of Candidate or Treasurer

Andrea Rodriguez-Strock

Date: 2/12/2020

Email friendsofandrearodriguez@gmail.com

Daytime Phone: 4145203492

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
 Friends of Andrea Rodriguez for Milwaukee County Supervisor D4

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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	Katy Kujala-Korpela 516 E Bolivar Ave Milwaukee WI 53207-5102 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____		\$25.00	\$25.00
2/3/2020	Kenneth Greening 642 s. 94th Place West Allis, WI 53214-1205 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# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 125.00	\$125.00
TOTAL ITEMIZED CONTRIBUTIONS	\$ 125.00	\$125.00
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$ 0.00	\$0.00
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$ 125.00	125.00

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name
Friends of Andrea Rodriguez for Milwaukee County Supervisor D4

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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
01/17/2020	UNION COPY CENTER 6603 W OKLAHOMA AVE MILWAUKEE WI Check if: <input checked="" type="checkbox"/> In-Kind Offset	printing	\$232.32
	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		
	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			\$ 232.32
TOTAL ITEMIZED EXPENDITURES			\$ 232.32
TOTAL UNITEMIZED EXPENDITURES			\$ 5.00
TOTAL EXPENDITURES			\$ 238.32