

RECEIPTS
Contributions (Including Loans) From Individuals

Complete Committee Name
Friends of Barb Schuenherr

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
1/12/2020	Barbara E. Schuenherr 1324 N. 74 th St Wauwatosa WI 53213 (cash)	Business owner / RN (Candidate)	\$ 100 ⁰⁰	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
1/12/2020	Diane Dagelen 8444 Hill Street Wauwatosa, WI 53226	Retired	\$25 ⁰⁰	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
1/12/2020	Terry Feezor 7350 W state st Wauwatosa, WI 53213	Retired	\$100 ⁰⁰	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
1/14/2020	Joseph E. Schmitz 8910 Jackson Park Blvd Wauwatosa, WI	Finance	\$10 ⁰⁰	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
1/14/2020	Jeffery Dan Maddox 105 N. 88 th street Wauwatosa, WI 53226	Consultant	\$50 ⁰⁰	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
1/17/2020	Carol C. Hudson 1828 Underwood Ave Wauwatosa, WI 53213	Retired	\$100 ⁰⁰	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
1/17/2020	Margaret Hoyt 1848 N. 85 th Street Wauwatosa, WI 53226	Occupational Therapist	\$50 ⁰⁰	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 435

Cont. P. 2

TOTAL ITEMIZED CONTRIBUTIONS

\$ 435

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$ 0

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ see p. 2

Contributions (Including Loans) From Individuals

Complete Committee Name
Friends of Barb Schoenherr

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

will be
 incurred
 per instr.
 from Richard
 Bolger
 2/3/2020

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
1/24/2020	Peter Abbott 865 N. 60th St. Wauwatosa, WI 53213 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	Retired	\$75 ⁰⁰	
1/26/2020	Barbara E. Schoenherr 1324 N. 74th St. Wauwatosa, WI 53214 Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	Business owner/RN (candidate)	\$601.61	
2/1/2020	Russ Drover 7530 W. State St. Wauwatosa, WI 53219 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	Investment Accountant	\$50 ⁰⁰	
2/1/2020	Dawn M. Crowley 619 N. 98th St. Wauwatosa, WI 53226 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	Retired	\$25 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#			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 751.61
P. 1 + P. 2 TOTAL ITEMIZED CONTRIBUTIONS	\$ 1,186.61
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$ 0
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$ 1,186.61

RECEIPTS
Contributions from Committees
(Transfers-In)

Complete Committee Name
Friends of Barb Schoenherr

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

Date	Full Name of Committee, Mailing Address and Zip Code	Amount of Contribution
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
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	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	

SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE

\$ - 0 -

TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES

\$ - 0 -

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name
Friends of Barb Schoenherr

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
	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		
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	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ - 0 -
TOTAL ITEMIZED EXPENDITURES	\$ - 0 -
TOTAL UNITEMIZED EXPENDITURES	\$ - 0 -
TOTAL EXPENDITURES	\$ - 0 -

DISBURSEMENTS
Contributions To Committees
(Transfers-Out)

Complete Committee Name
Friends of Barb Schoenherr

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

Date	Full Name, Mailing Address and Zip Code	Amount	Y-T-D Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
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	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE		\$ 0	
TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES		\$ 0	

SCHEDULE 3-A

**Incurred Obligations Excluding Loans
ADDITIONAL DISCLOSURE**

Complete Committee Name
Friends of Barb Schoenherr

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

Date	Full Name, Mailing Address and Zip Code of Creditor	Outstanding Balance Beginning This Period	New Obligations or Additions This Period	Cumulative Payments This Period	Outstanding Balance At Close of This Period
1/7/20	Barbara E. Schoenherr 1324 N. 74th St. Wauwatosa, WI 53213	- 0 -	\$ 12.00	0	\$ 12.00
		Nature of Debt (Purpose) Parking for filling signatures			
1/25/20	Barbara E. Schoenherr 1324 N. 74th St. Wauwatosa, WI 53213	0 - 12.00	\$ 2,067.96 \$ 5.47	0	
		Nature of Debt (Purpose) Office Supplies (Printer Ink Paper File Box)			
1/26/20	Barbara E. Schoenherr 1324 N. 74th St. Wauwatosa, WI 53213	- 0 -	\$ 500.00	0	601.61
		Nature of Debt (Purpose) ck # 3317 (personal acct) Pd Union Copy Centers towards campaign order Flyers, Signs Bus. Cards set up			
/ /					
		Nature of Debt (Purpose)			
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		Nature of Debt (Purpose)			
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		Nature of Debt (Purpose)			
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		Nature of Debt (Purpose)			

SUBTOTAL ITEMIZED OBLIGATIONS THIS PAGE	\$	589.61
TOTAL ITEMIZED OBLIGATIONS	\$	589.61
TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS	\$	12.00
TOTAL INCURRED OBLIGATIONS	\$	601.61

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

Complete Committee Name

Friends of Barb Schoenherr

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

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	\$ -0-
TOTAL OUTSTANDING LOANS	\$ -0-