

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

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 Sylvia Ortiz-Velez

Street Address

517 W Madison St

City, State and Zip Code

Milwaukee, WI 53204

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 2021 Pre-Primary _____
 July Continuing _____ Spring Fall Special Termination Report
 September Continuing _____ Pre-Election _____ 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	\$ 0	\$
1B. Contributions from Committees (Transfers-In)	\$ 0	\$
1C. Other Income and Commercial Loans	\$ 0	\$
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 0	\$

2. DISBURSEMENTS

2A. Gross Expenditures	\$ 30	\$
2B. Contributions to Committees (Transfers-Out)	\$ 0	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 30	\$

CASH SUMMARY

Cash Balance Beginning of Report	\$ 151.04
Total Receipts	\$ 0
Subtotal	\$ 151.04
Total Disbursements	\$ 30.00
CASH BALANCE END OF REPORT	\$ 121.04
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ 0
LOANS (Balance at the Close of This Period-3B)	\$ 17.08

REC'D 2/10/21 11:08 AM
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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	Signature of Candidate or Treasurer	Date:
Sylvia Velez	<i>[Signature]</i>	1/14/2021
	Email	Daytime Phone:

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.

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name
Friends of Sylvia Ortiz-Velez

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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
7/31/2020	Summit Bank Check if: <input type="checkbox"/> In-Kind Offset	Monthly Bank Fee	5
8/31/2020	Summit Bank Check if: <input type="checkbox"/> In-Kind Offset	Monthly Bank Fee	5
9/30/2020	Summit Bank Check if: <input type="checkbox"/> In-Kind Offset	Monthly Bank Fee	5
10/31/2020	Summit Bank Check if: <input type="checkbox"/> In-Kind Offset	Monthly Bank Fee	5
11/30/2020	Summit Bank Check if: <input type="checkbox"/> In-Kind Offset	Monthly Bank Fee	5
12/31/20	Summit Bank Check if: <input type="checkbox"/> In-Kind Offset	Monthly Bank Fee	5
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE

\$ 30

TOTAL ITEMIZED EXPENDITURES

\$

TOTAL UNITEMIZED EXPENDITURES

\$

TOTAL EXPENDITURES

\$ 30

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

Complete Committee Name
Friends

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
12/31/2008	Sylvia Velez 517 W Madison St Milw, WI 53204	17.08			17.08

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 \$

TOTAL OUTSTANDING LOANS \$