

**Note:** Use of this form is required by the Ethics Commission for reporting campaign finance activity. Completion of this form is mandatory for local committees. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose.

*Office Use Only*

POSTMARKED 01/18/22 *PL*

Is this report an amendment?  Yes  No

COMMITTEE IDENTIFICATION			
Committee Name	Friends of Patti Logsdon		
Mailing Address	12100 W. Belmar Drive Franklin, WI 53132		
Email	blogsdon@wi.rr.com	Daytime Phone	414-469-4806

FILING PERIOD			
<input checked="" type="checkbox"/> January Continuing	<input type="checkbox"/> Spring Pre-Primary	<input type="checkbox"/> Fall Pre-Primary	<input type="checkbox"/> Special Pre-Primary
<input type="checkbox"/> July Continuing	<input type="checkbox"/> Spring Pre-Election	<input type="checkbox"/> September	<input type="checkbox"/> Special Pre-Election
	<input type="checkbox"/> Fall Pre-Election	<input type="checkbox"/> Special Post-Election	
Report Year			2021
Is this a Termination Report?			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SUMMARY OF MONETARY RECEIPTS AND DISBURSEMENTS			
	<b>This Period</b>	<b>Year-to-Date</b>	<i>Office Use Only</i>
<b>Beginning Cash On-Hand</b>	\$ 448.08		
<b>1. Money Received (Receipts)</b>			
1-A. Monetary Contributions from Individuals	\$ 100.00	\$ 100.00	
1-B. Monetary Contributions from Committees (Transfers-In)	\$ -	\$ -	
1-C. Other Income and Commercial Loans	\$ -	\$ -	
<i>Total Monetary Receipts</i>	\$ 100.00	\$ 100.00	
<b>2. Money Spent (Disbursements)</b>			
2-A. Gross Monetary Expenditures	\$ 81.70	\$ 81.70	277.80 P.L.
2-B. Monetary Contributions to Committees (Transfers-Out)	\$ -		277.80 P.L.
<i>Total Monetary Disbursements</i>	\$ 81.70	\$ 81.70	
<b>Ending Cash On-Hand</b>	\$ 466.38		

SUMMARY OF OUTSTANDING DEBTS			
3-A. Incurred Obligations (Unpaid Bills)	\$ -		
3-B. Outstanding Loan Balance	\$ 6,600.00		

*I certify that I have examined this report and to the best of my knowledge and belief, it is true, correct, and complete.*

	Patti Logsdon	1/18/2022
Signature of the candidate or treasurer	Print Name	Date

**RECEIPTS**  
**Contributions (Including Loans) From Individuals**

Complete Committee Name  
 Friends of Patti Logsdon

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
12/29/21	John Karol 719 S 92nd Street West Allis, WI 53214  Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____	Retired	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# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
<b>SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE</b>			\$	100.00
<b>TOTAL ITEMIZED CONTRIBUTIONS</b>			\$	100.00
<b>TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS</b>			\$	
<b>TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS</b>			\$	100.00

**SCHEDULE 2-A**

**DISBURSEMENTS**  
Gross Expenditures

Complete Committee Name  
Friends of Patti Logsdon

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
7/15/21	US Bank  Check if: <input type="checkbox"/> In-Kind Offset	Bank Fee	5.00
8/13/21	US Bank  Check if: <input type="checkbox"/> In-Kind Offset	Bank Fee	5.00
9/15/21	US BANK  Check if: <input type="checkbox"/> In-Kind Offset	Bank Fee	5.00
10/15/21	US Bank  Check if: <input type="checkbox"/> In-Kind Offset	Bank Fee	5.00
11/15/21	US Bank  Check if: <input type="checkbox"/> In-Kind Offset	Bank Fee	5.00
12/1/21	US Bank  Check if: <input type="checkbox"/> In-Kind Offset	Merchant Services	51.70
12/14/21	US Bank  Check if: <input type="checkbox"/> In-Kind Offset	Bank Fee	5.00
	Check if: <input type="checkbox"/> In-Kind Offset		
<b>SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE</b>			<b>\$ 81.70</b>
<b>TOTAL ITEMIZED EXPENDITURES</b>			<b>\$ 81.70</b>
<b>TOTAL UNITEMIZED EXPENDITURES</b>			<b>\$</b>
<b>TOTAL EXPENDITURES</b>			<b>\$ 81.70</b>

**SCHEDULE 3-B**

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

Complete Committee Name  
Friends of Patti Logsdon

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

	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
Date	Patti Logsdon 12100 W. Belmar Drive Franklin, WI 53132	6,600.00	00.00	00.00	6,600.00
01/18/22					

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
	\$

	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
Date					
/ /					

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
	\$

	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
Date					
/ /					

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** \$ 6,600.00

**TOTAL OUTSTANDING LOANS** \$ 6,600.00