

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

Is This Report an Amendment: Yes No

*Rowd
3/28/22
MKH*

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

COMMITTEE IDENTIFICATION

Name of Committee

Kathleen Vincent for Milwaukee County Supervisor

Street Address

6803 W. Grange Avenue

City, State and Zip Code

Greendale, WI 53129

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 _____
 July Continuing _____ Spring Fall Special
 September Continuing _____ Pre-Election *2022*

Termination Report
also complete Schedule

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

	Column A This Period	Column B Calendar Year-To-Date
1A. Contributions (Including Loans) from Individuals	\$ <i>621.50</i>	\$ <i>621.50</i>
1B. Contributions from Committees (Transfers-In)	\$ <i>0</i>	\$ <i>0</i>
1C. Other Income and Commercial Loans	\$ <i>0</i>	\$ <i>0</i>
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ <i>621.50</i>	\$ <i>621.50</i>

2. DISBURSEMENTS

2A. Gross Expenditures	\$ <i>621.50</i>	\$ <i>621.50</i>
2B. Contributions to Committees (Transfers-Out)	\$ <i>0</i>	\$ <i>0</i>
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ <i>621.50</i>	\$ <i>621.50</i>

CASH SUMMARY

Cash Balance Beginning of Report	\$ <i>0</i>
Total Receipts	\$ <i>621.50</i>
Subtotal	\$ <i>621.50</i>
Total Disbursements	\$ <i>621.50</i>
CASH BALANCE END OF REPORT	\$ <i>0</i>
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ <i>0</i>
LOANS (Balance at the Close of This Period-3B)	\$ <i>621.50</i>

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

Kathleen Vincent

Signature of Candidate or Treasurer

Kathleen Vincent

Date: *March 22, 2022*

Email: *yukonlearn2@gmail.com*

Daytime Phone: *(262) 225-943*

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.

Complete Committee Name
Kathleen Vincent for Milwaukee County Supervisor

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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
2/3/22	Kathleen Vincent 6803 W. Grange Ave, Greendale, WI 53129 Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	Teacher	\$ 511.68	\$ 511.68
3/4/22	Kathleen Vincent 6803 W. Grange Ave, Greendale, WI 53129 Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	Teacher	\$ 46.46	\$ 46.46
3/21/22	Kathleen Vincent 6803 W. Grange Ave. Greendale, WI 53129 Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	Teacher	\$ 63.36	\$ 63.36
	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	\$ 621.50	\$ 621.50
TOTAL ITEMIZED CONTRIBUTIONS	\$ 621.50	\$ 621.50
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$ 0	0
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$ 621.50	\$ 621.50

Complete Committee Name

Kathleen Vincent for Milwaukee County Supervisor

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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
2/3/22	Weber Printing Company 3048 North 34th Street Milwaukee, WI 53210 Check if: <input checked="" type="checkbox"/> In-Kind Offset	100 Yard Signs/Wins/Assembly 2 Car Magnets	\$511.68
3/4/22	Printgraphix LLC 4967 S. 76th Street Greenfield, WI 53220 Check if: <input checked="" type="checkbox"/> In-Kind Offset	500 Business Cards	\$46.46
3/21/22	Printgraphix LLC 4967 S. 76th Street Greenfield, WI 53220 Check if: <input checked="" type="checkbox"/> In-Kind Offset	1,000 Business Cards	\$63.36
	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	\$ 621.50
TOTAL ITEMIZED EXPENDITURES	\$ 621.50
TOTAL UNITEMIZED EXPENDITURES	\$ 0
TOTAL EXPENDITURES	\$ 621.50

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

Complete Committee Name

Kathleen Vincent for Milwaukee County Supervisor

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
		0	#621,50	0	#621,50

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

\$