

**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.

*Rand 3/24/22
MRT*

COMMITTEE IDENTIFICATION

Name of Committee

Kathleen Vincent For Milwaukee County Supervisor

Street Address

6803 W. Grange Ave.

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 _____

Termination Report
also complete Schedule 4

SUMMARY OF RECEIPTS AND DISBURSEMENTS

	Column A This Period	Column B Calendar Year-To-Date
1. RECEIPTS		
1A. Contributions (Including Loans) from Individuals	\$	\$
1B. Contributions from Committees (Transfers-In)	\$	\$
1C. Other Income and Commercial Loans	\$	\$
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$	\$
2. DISBURSEMENTS		
2A. Gross Expenditures	\$ <i>621.50</i>	\$ <i>621.50</i>
2B. Contributions to Committees (Transfers-Out)	\$	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$	\$

CASH SUMMARY

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

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 <i>Kathleen Vincent</i>	Signature of Candidate or Treasurer <i>Kathleen Vincent</i> Date: <i>March 22, 2022</i>
	Email: <i>yukonlearn2@gmail.com</i> Daytime Phone: <i>(262) 225-9433</i>

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 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/Wires/Assembly 2 Car Magnets	\$ 511.68
3/4/22	Printgraphix LLC 4967 S. 76th St. Greenfield, WI 53220 Check if: <input type="checkbox"/> In-Kind Offset	500 Business Cards	\$ 46.46
3/22/22	Printgraphix LLC 4967 S. 76th St. Greenfield, WI 53220 Check if: <input checked="" type="checkbox"/> In-Kind Offset	1000 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	\$
TOTAL EXPENDITURES	\$ 621.50