

**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 Andrew Shaw

Street Address

947 N. 34th St.

City, State and Zip Code

Milwaukee, WI 53208

RECEIVED
2015 JUL 29 P 3:10
CITY OF MILWAUKEE
ELECTION COMMISSION

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 Spring Fall Special
 July Continuing *2015* Pre-Election Spring Fall Special

Termination Report
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	\$ 2286 ⁸⁰ / ₁₀₀	\$ 2286 ⁸⁰ / ₁₀₀
1B. Contributions from Committees (Transfers-In)	\$ 0	\$ 0
1C. Other Income and Commercial Loans	\$ 0	\$ 0
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 2286 ⁸⁰ / ₁₀₀	\$ 2286 ⁸⁰ / ₁₀₀

2. DISBURSEMENTS

2A. Gross Expenditures	\$ 1207 ²⁷ / ₁₀₀	\$ 1207 ²⁷ / ₁₀₀
2B. Contributions to Committees (Transfers-Out)	\$ 0	\$ 0
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 1207 ²⁷ / ₁₀₀	\$ 1207 ²⁷ / ₁₀₀

CASH SUMMARY

Cash Balance Beginning of Report	\$ 0
Total Receipts	\$ 2286 ⁸⁰ / ₁₀₀
Subtotal	\$ 2286 ⁸⁰ / ₁₀₀
Total Disbursements	\$ 1207 ²⁷ / ₁₀₀
CASH BALANCE END OF REPORT	\$ 1079.53 ⁰⁰ / ₁₀₀ <i>OK</i>
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ 0
LOANS (Balance at the Close of This Period-3B)	\$ 0

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>Austin Durr</i>	Signature of Candidate or Treasurer 	Date: <i>7/29/15</i>
	Email	Daytime Phone: <i>2064194994</i>

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

GAB-2L (Rev. 04/14) This form is prescribed by the Government Accountability Board. Completed forms must be filed with your local clerk.

OK

SCHEDULE 1-A

RECEIPTS

Contributions (Including Loans) From Individuals

Complete Committee Name
Friends of Andrew Shaw

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

Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
5/27/15	Andrew Shaw 947 N. 34th St Milwaukee, WI 53208	Attorney 6815 W. Capitol Dr. Milwaukee, WI 53216	\$ 120.00	\$ 120.00
5/27/15	Andrew Shaw 947 N. 34th St Milwaukee, WI 53208	Attorney 6815 W. Capitol Dr. Milwaukee, WI 53216	\$ 30.00	\$ 150.00
5/30/15	Andrew Shaw 947 N. 34th St Milwaukee, WI 53208	Attorney 6815 W. Capitol Dr. Milwaukee, WI 53216	\$ 1.17	\$ 151.17
6/1/15	Andrew Shaw 947 N. 34th St Milwaukee, WI 53208	Attorney 6815 W. Capitol Dr. Milwaukee, WI 53216	\$ 10.00	\$ 161.17
6/3/15	Andrew Shaw 947 N. 34th St Milwaukee, WI 53208	Attorney 6815 W. Capitol Dr. Milwaukee, WI 53216	\$ 60.00	\$ 221.17
6/4/15	Andrew Shaw 947 N. 34th St Milwaukee, WI 53208	Attorney 6815 W. Capitol Dr. Milwaukee, WI 53216	\$ 59.40	\$ 280.57
6/6/15	Andrew Shaw 947 N. 34th St. Milwaukee WI 53208	Attorney 6815 W. Capitol Dr. Milwaukee, WI 53216	\$ 13.73	\$ 294.30
6/22/15	Andrew Shaw 947 N. 34th St Milwaukee, WI 53208	Attorney 6815 W. Capitol Dr. Milwaukee, WI 53216	\$ 10.50	\$ 304.80

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE \$ 304.80

TOTAL ITEMIZED CONTRIBUTIONS \$

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS \$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS \$

SCHEDULE 1-A

RECEIPTS

Contributions (Including Loans) From Individuals

Complete Committee Name
Friends of Andrew Shaw

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

Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
6/2/15	Rodomin Burdum 1004 Laborer St. Watertown, VT 53094	TUT Bar @ Duran N 866 Co. Rd R Watertown, VT 53098	\$ 380	\$ 380
6/2/15	Lance Dophe 803 Cheyenne Cir. Watertown, VT 53094	Dophe Insurance 307 E. Main St. owner Watertown, VT 53094	\$ 380	\$ 380
6/5/15	Scott Kravch 1143 Mary Hill Cir. Hartland, VT 53029	Silk Owner 11400 W. Silver Springs Milwaukee, WI 53225	\$ 386	\$ 386
6/5/15	Joseph F. Modl W 180 N 9895 River Bend Cir. Germantown, VT 53022	Silk Owner 11400 W. Silver Springs Milwaukee, WI 53225	\$ 386	\$ 386
6/13/15	John Hahn #6 N 93 W 17144 White Oak Menomonie Falls, VT 53057	Retired	\$ 380	\$ 380
6/13/15	Fabio Woyfal 4219 S. Jasper Milwaukee, WI 53207	Owner Manager Pietros Pizzeria 2912 S. Kinnickinnick Milwaukee, WI 53207	\$ 50	
6/13/15	Sarah Hyde 17450 St. James Rd. Brookfield, VT 53045	Teacher / St. Dominic Catholic 18255 W. Capitol Dr. Brookfield, VT 53045	\$ 20	
1 / 1				

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 1982

TOTAL ITEMIZED CONTRIBUTIONS

~~\$ 2290.80~~

2286.80/106

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS

\$ -

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

~~\$ 2290.80~~

2286.80/106

SCHEDULE 1-B

RECEIPTS
Contributions from Committees
(Transfers-In)

Complete Committee Name
Friends of Andrew Shaw

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

Date / /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	<i>None</i>		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
Date / /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
Date / /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
Date / /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
Date / /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
Date / /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
Date / /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
Date / /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
Date / /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	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 1-C

RECEIPTS
Other Income and Commercial Loans

Complete Committee Name
Friends of Andrew Shaw

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

Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
	<u>NONE</u>		
Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount

SUBTOTAL OTHER INCOME THIS PAGE \$ 0

TOTAL ITEMIZED OTHER INCOME \$ 0

TOTAL UNITEMIZED OTHER INCOME \$20 OR LESS \$ 0

TOTAL OTHER INCOME \$ 0

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name
Friends of Andrew Shaw

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
5/27/15	City Milwaukee Election, 501 200 E. Wells St Milwaukee, WI 53202 Check if: <input checked="" type="checkbox"/> In-Kind Offset	Walking List / votes	\$30
5/30/15	Go Daddy Operating Co. #219 14455 N. Hayden Rd Scotts Dale, AZ 85260 Check if: <input checked="" type="checkbox"/> In-Kind Offset	Internet Domain	\$1.17
6/1/15	City Milwaukee Election 501 200 E Wisconsin Milwaukee, WI 53202 Check if: <input checked="" type="checkbox"/> In-Kind Offset	Final Payment Walking list votes	\$10
6/2/15	Wells Fargo Bank 2675 N. Mayfair Milwaukee, WI 53226 Check if: <input type="checkbox"/> In-Kind Offset	Check Fees	\$6.00
6/4/15	Blue Host 560 Timpanogos Hwy Grem UT 84097 Check if: <input checked="" type="checkbox"/> In-Kind Offset	Internet Hosting	\$59.40
6/4/15	Erato Pty Ltd. 121 Kings St. Melbourne Victoria, Australia Check if: <input checked="" type="checkbox"/> In-Kind Offset	Internet Theme	\$60.00
6/6/15	Fed Ex Office 1703 N Farwell Ave Milwaukee, WI 53202 Check if: <input checked="" type="checkbox"/> In-Kind Offset	Photo copies	\$13.73
6/9/15	Harland Clarke Checks 15955 LA Center Parkway San Antonio, TX 78256 Check if: <input type="checkbox"/> In-Kind Offset	Purchase checks	\$20.00
6/11/15	Target 3900 N. 124th St Wauwatosa, WI 53222 Check if: <input type="checkbox"/> In-Kind Offset	Office supplies	\$33.31

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE

\$ 233.61

TOTAL ITEMIZED EXPENDITURES

\$

TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS

\$

TOTAL EXPENDITURES

\$

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name
Friends of Andrew Shaw

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
6/12/15	Binh Lee 44110 N. 61st St Milwaukee, WI 53218 Check if: <input type="checkbox"/> In-Kind Offset	Web Designer	\$ 600.00
6/18/15	MAP Store 3720 N. 124th St. Wauwatosa, WI 53222 Check if: <input type="checkbox"/> In-Kind Offset	MAP	\$ 363.66
6/22/15	Fiverr.com c/o Payroll 2211 N. 1st St. SAN JOSE, CA 95131 Check if: <input type="checkbox"/> In-Kind Offset	Logo Design www.Fiverr.com	\$ 10.50
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE \$ 973.66

TOTAL ITEMIZED EXPENDITURES \$ 1207.27

TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS \$

TOTAL EXPENDITURES \$ 1207.27

SCHEDULE 3-A

**ADDITIONAL DISCLOSURE
Incurred Obligations Excluding Loans**

Complete Committee Name
Friends of Andrew Shaw

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

		Outstanding Balance Beginning This Period	New Obligations or Additions This Period	Cumulative Payments This Period	Outstanding Balance At Close of This Period
Date / /	Full Name, Mailing Address and Zip Code of Creditor <i>NONE</i>				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			

SUBTOTAL ITEMIZED OBLIGATIONS THIS PAGE	\$	<i>0</i>
TOTAL ITEMIZED OBLIGATIONS	\$	<i>0</i>
TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS	\$	<i>0</i>
TOTAL INCURRED OBLIGATIONS	\$	<i>0</i>

ADDITIONAL DISCLOSURE
Loans
Individual, Committee or Commercial

Complete Committee Name
Friends of Andrew Show

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

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Balance Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Balance End of This Period
/ /	<u>None</u>				

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Name and Address of Employer
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Name and Address of Employer
	Amount Guaranteed Outstanding \$

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Balance Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Balance End of This Period
/ /					

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Name and Address of Employer
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Name and Address of Employer
	Amount Guaranteed Outstanding \$

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Balance Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Balance End of This Period
/ /					

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Name and Address of Employer
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Name and Address of Employer
	Amount Guaranteed Outstanding \$

SUBTOTAL OUTSTANDING LOANS THIS PAGE	\$	<u>0</u>
TOTAL OUTSTANDING LOANS	\$	<u>0</u>