

**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.

RECEIVED

FEB 12 P 12:37  
CITY OF MILWAUKEE  
ELECTION COMMISSION  
OFFICE USE ONLY

**COMMITTEE IDENTIFICATION**

Name of Committee: **FRIENDS OF MICHAEL BONDS**  
Street Address: **3519 NORTH 50TH STREET**  
City, State and Zip Code: **MIL. WI. 53216**

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 **2016**  Pre-Election \_\_\_\_\_  Spring  Fall  Special  Termination Report  
also complete Schedule 4

**SUMMARY OF RECEIPTS AND DISBURSEMENTS**

	Column A This Period	Column B Calendar Year-To-Date
<b>1. RECEIPTS</b>		
IA. Contributions (Including Loans) from Individuals	\$ 2,274. <sup>75</sup> / <sub>100</sub>	\$ 2,274. <sup>75</sup> / <sub>100</sub>
IB. Contributions from Committees (Transfers-In)	\$ 0	\$ 0
IC. Other Income and Commercial Loans	\$ 0	\$ 0
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)	\$ 2,274. <sup>75</sup> / <sub>100</sub>	\$ 2,274. <sup>75</sup> / <sub>100</sub>
<b>2. DISBURSEMENTS</b>		
2A. Gross Expenditures	\$ 2,393. <sup>11</sup> / <sub>100</sub>	\$ 2,393. <sup>11</sup> / <sub>100</sub>
2B. Contributions to Committees (Transfers-Out)	\$ 0	\$ 0
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	\$ 2,393. <sup>11</sup> / <sub>100</sub>	\$ 2,393. <sup>11</sup> / <sub>100</sub>

**CASH SUMMARY**

Cash Balance Beginning of Report	\$ 122.81
Total Receipts	\$ 2,274. <sup>75</sup> / <sub>100</sub>
Subtotal	\$ 2,397.56
Total Disbursements	\$ 2,393.11
<b>CASH BALANCE END OF REPORT</b>	\$ 4.45
<b>INCURRED OBLIGATIONS</b> (Balance at the Close of This Period-3A)	\$ 1,283. <sup>60</sup> / <sub>100</sub>
<b>LOANS</b> (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 <b>MICHAEL BONDS</b>	Signature of Candidate or Treasurer <i>Michael Bonds</i>	Date: <b>2-12-16</b>
	Email: <b>FRIENDS OF MICHAEL BONDS</b>	Daytime Phone: <b>(414) 892-3691</b>

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

**FRIENDS OF MICHAEL BOYDS**

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
1-20-16	ZARKEY HEGWOOD 6659 N. BURBON ST MILWAUKEE, WI. 53224 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	PH.D STUDENT	\$7 <sup>00</sup> / <sub>100</sub>	\$7 <sup>00</sup> / <sub>100</sub>
1-20-16	JASMINE HEGWOOD 6659 N. BURBON ST MIL. WI. 53224 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	BUSINESS OWNER - BEAUTY SALON	\$16 <sup>00</sup> / <sub>100</sub>	\$16 <sup>00</sup> / <sub>100</sub>
1-20-16	SANDRA CURRIE 4446 N. 70TH ST MIL. WI. 53214 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	SCHOOL SAFETY PERSONNEL	\$25 <sup>00</sup> / <sub>100</sub>	\$25 <sup>00</sup> / <sub>100</sub>
1-20-16	THERESA FUCHES 6110 W. KANL AVE. APT #5 MILWAUKEE, WI. 53218 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	GENERAL LABORER	\$10 <sup>00</sup> / <sub>100</sub>	\$10 <sup>00</sup> / <sub>100</sub>
1-20-16	TANYA BLEKINAGE 5020 NORTH 68TH ST MIL. WI. 53218 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	SCHOOL SAFETY PERSONNEL	\$10 <sup>00</sup> / <sub>100</sub>	\$10 <sup>00</sup> / <sub>100</sub>

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 68 <sup>00</sup> / <sub>100</sub>	68 <sup>00</sup> / <sub>100</sub>
TOTAL ITEMIZED CONTRIBUTIONS	\$ 68 <sup>00</sup> / <sub>100</sub>	68 <sup>00</sup> / <sub>100</sub>
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$ 0	0
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$ 68 <sup>00</sup> / <sub>100</sub>	68 <sup>00</sup> / <sub>100</sub>

Complete Committee Name  
**FRIENDS OF MICHAEL BONDS**

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
2-8-16 1-25-16	MICHAEL BONDS 3519 N. 50TH ST MIL. WI 53216 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____	CANDIDATE	\$ 410 <sup>00</sup>	\$ 410 <sup>00</sup>
	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# _____			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 410	410
TOTAL ITEMIZED CONTRIBUTIONS	\$ 410	410
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$ 0	0
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$ 410	410 <sup>00</sup>

2,274<sup>00</sup>

**SCHEDULE 1-A**

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

Complete Committee Name  
**FRIENDS OF MICHAEL BONDS**

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
1-2016	EW ELECTRIC 2934 N. 36TH ST MIL. WI. 53216 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	BUSINESS (LLC)	400 <sup>00</sup> / <sub>00</sub>	400 <sup>00</sup> / <sub>00</sub>
1-2016	EARL INGRAM 3718 N. 53RD ST MIL. WI. 53216 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	EDUCATOR/ RETIRED FACTORY WORKER	100	100
1-2016	CHARLES WHITE 3519 N. 51TH ST MIL. WI. 53216 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	EDUCATOR	400	400
1-2016	LENA STEWART 3337 N. 51TH ST MIL. WI. 53216 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	RETIRED ADMINISTRATOR	100	100
1-2016	MARVIN PRATT 4045 N. 16TH ST MIL. WI. 53209 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	RETIRED POLITICAN	50	50 <del>200</del> separated per was KPM

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 1050	1,050 <sup>00</sup>
TOTAL ITEMIZED CONTRIBUTIONS	\$ 1050	0
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$ 0	1050 <sup>00</sup>
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$ 1050	1050 <sup>00</sup>

2,074<sup>00</sup>

Complete Committee Name  
**FRIENDS OF MICHAEL BONDS**

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
1-8-16	BEARBE BUTLER 11030 MANDU LN READSTOWN, VT 54652 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	FORMER ACADEMIA	\$25	\$25
1-28-16	MARVIN PRUITT 4045 N. 16th St MIL. WI 53216 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	FORMER ACADEMIA/MAN	150 <sup>00</sup> / <sub>00</sub>	2000 <sup>00</sup> / <sub>00</sub> → see p. 3
1-28-16	JAMES HENRY 3779 N. 54th St MIL. WI 53216 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	RETIRED EPLATA	50 <sup>00</sup> / <sub>00</sub>	50 <sup>00</sup> / <sub>00</sub>
	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	\$ 225	275
TOTAL ITEMIZED CONTRIBUTIONS	\$ 225	275
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$ 0	0
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$ 225	275

2,074<sup>75</sup>/<sub>00</sub>

Complete Committee Name  
**FRIENDS OF MICHAEL BONDS**

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
1-20-14	<b>WELDON DYE</b> <b>3876 SOUTH 87TH STREET</b> <b>MILWAUKEE WI 532</b> Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	<b>RETIRED</b> <b>SCHOOL</b> <b>TEACHER</b>	<b>\$400</b>	<b>\$400</b>
	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#			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 400	400
TOTAL ITEMIZED CONTRIBUTIONS	\$ 400	400
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$ 0	0
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$ 400	400

2,274.75

**SCHEDULE 2-A**

**DISBURSEMENTS**  
Gross Expenditures

Complete Committee Name  
**FRIENDS OF MICHAEL BONDS**

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
1-15-16	U.S. POSTAL OFFICE 3900 N. 35th ST MIL. WI 53206 Check if: <input type="checkbox"/> In-Kind Offset	STAMPS FOR MAILING FLYERS TO ABSENTEE VOTERS	\$107.80 00
1-21-16	CLARK GRAPHICS 2915 N. CAKLAND RD MIL WI 53206 Check if: <input type="checkbox"/> In-Kind Offset	CAMPAIGN FLYERS	188.50 00
1-22-16	POINTER MARKETING WEST BEND, WI 53090 Check if: <input type="checkbox"/> In-Kind Offset	CAMPAIGN FLYERS FOR MAILING and 25 money order fee	\$1155.00
1-25-16	CAYEN HILL, William Howell, DANROD ROGERS, Devon ROGERS, REMISS JANSURY ETC Check if: <input type="checkbox"/> In-Kind Offset	PAID YOUTH <sup>WORKERS</sup> TO PASS OUT AIRMAIL FLYERS DOOR-TO-DOOR	\$210.00
1-28-16	OFFICE DEPOT EAST CAPITAL DRIVE MIL. WI 53214 Check if: <input type="checkbox"/> In-Kind Offset	MAILING LABELS, ENVELOPES, ETC FOR ABSENTEE VOTERS	\$11.75 00
2-10-16	POINTER MARKETING WEST BEND, WI 53090 Check if: <input type="checkbox"/> In-Kind Offset	MAILING CAMPAIGN FLYERS 450 + 97.00 CASH CHECK FEE	\$487.00 00
2-8-16	CLARK GRAPHICS 2915 N. CAKLAND RD MIL. WI 53206 Check if: <input type="checkbox"/> In-Kind Offset	CAMPAIGN FLYERS	\$199.00 00
1-15-16	U.S. BANK 5300 W. CAPITAL MIL WI 53216 Check if: <input type="checkbox"/> In-Kind Offset	BANK <sup>SERVICE</sup> ANALYSIS FEE	\$4.00 00

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 2,393.11
TOTAL ITEMIZED EXPENDITURES	\$ 2,393.11
TOTAL UNITEMIZED EXPENDITURES	\$ 0
TOTAL EXPENDITURES	\$ 2,393.11

**SCHEDULE 2-B**

**DISBURSEMENTS**  
**Contributions To Committees**  
**(Transfers-Out)**

Complete Committee Name  
**FRIENDS OF MICHAEL BONDS**

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

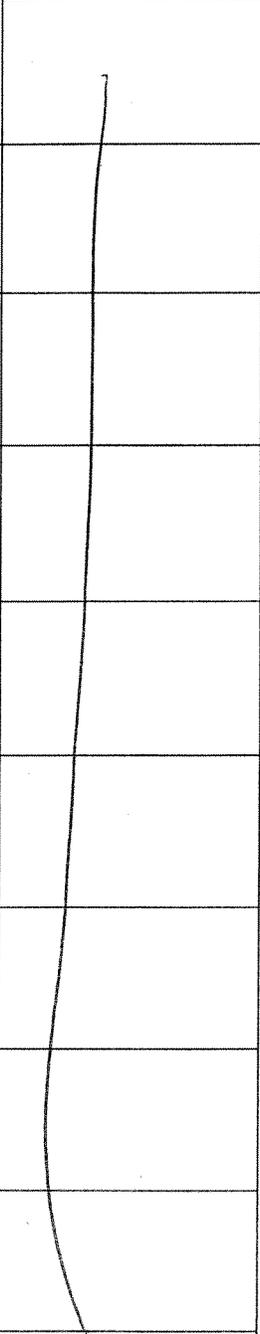
Date	Full Name, Mailing Address and Zip Code	Amount	Y-T-D Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		0
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
<b>SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE</b>		\$ 0	0
<b>TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES</b>		\$ 0	0

**SCHEDULE 1-B**

**RECEIPTS**  
Contributions from Committees  
(Transfers-In)

Complete Committee Name  
BLEND OF AFFILIATE BONDS

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

Date	Full Name of Committee, Mailing Address and Zip Code	Amount of Contribution
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
<b>SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE</b>		\$ 
<b>TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES</b>		\$ 

**SCHEDULE 3-A**

**Incurred Obligations Excluding Loans  
ADDITIONAL DISCLOSURE**

Complete Committee Name  
FRIENDS OF MICHAEL BONDS

STATEMENT  
PREPARED on  
2-5-16

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

Date	Full Name, Mailing Address and Zip Code of Creditor	Outstanding Balance Beginning This Period	New Obligations or Additions This Period	Cumulative Payments This Period	Outstanding Balance At Close of This Period
<u>2-5-16</u>	<u>PODSTER MARKETING 7019 STATE RD. 144W WEST BEND, WIS 53090</u>	<u>\$ 0</u>		<u>0</u>	<u>1,283.00</u>
		<u>Nature of Debt (Purpose) PREPARING AND MAILING POLITICAL MATERIALS</u>			
<u>1 1</u>					
		<u>Nature of Debt (Purpose)</u>			
<u>1 1</u>					
		<u>Nature of Debt (Purpose)</u>			
<u>1 1</u>					
		<u>Nature of Debt (Purpose)</u>			
<u>1 1</u>					
		<u>Nature of Debt (Purpose)</u>			
<u>1 1</u>					
		<u>Nature of Debt (Purpose)</u>			
<u>1 1</u>					
		<u>Nature of Debt (Purpose)</u>			

SUBTOTAL ITEMIZED OBLIGATIONS THIS PAGE	\$ <u>1,283.00</u>
TOTAL ITEMIZED OBLIGATIONS	\$ <u>1,283.00</u>
TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS	\$ <u>0</u>
TOTAL INCURRED OBLIGATIONS	\$ <u>1,283.00</u>

**SCHEDULE 3-B**

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

Complete Committee Name

*FRIENDS of MICHAEL BENDS*

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
/ /					

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**

\$ 0

**TOTAL OUTSTANDING LOANS**

\$ 0

