CAMPAIGN FINANCE REPORT
STATE OF WISCONSIN

Is this report an Amendment? **YES *** NO

COMMITTEE IDENTIFICATION		
Name of Committee	Wendell Harris for School Board	
Address	2727 N. 67th Street	OFFICE USE ONLY
City, State, ZIP	Milwaukee, WI 53210	**WSEB # ID**

Please check if address is different than previously reported ____

NAME OF REPORT	**Jan 2015 Continuing**	Pre-Primary 20__	Spring	Fall	Special
(Please circle)	July 20__ Continuing	Pre-election 20__	Spring	Fall	Special

SUMMARY OF RECEIPTS AND DISBURSEMENTS	**Column A This Period**	**Column B YTD**	**Audited Totals Office Use Only**	
1. RECEIPTS				
A. Contributions including Loans from Individuals	$ 261.79			
B. Contributions from Committees (Transfers-In)	$ -			
C. Other Income and Commercial Loans	$ -			
TOTAL RECEIPTS (Add totals from 1A, 1B, and 1C)	$ 261.79	$ -		
1. DISBURSEMENTS				
A. Gross Expenditures	$ 236.79			
B. Contributions to Committees (Transfers-Out)	$ -			
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	$ 236.79	$ -		
CASH SUMMARY				
Cash Balance at Beginning of Report				
Total Receipts	$ 261.79			
Subtotal	$ 261.79			
Total Disbursements	$ 236.79			
CASH BALANCE AT END OF REPORT	$ 25.00			
INCURRED OBLIGATIONS (at close of period)	$ -			
LOANS (at close of period)	$ -			

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	Signature of Candidate or Treasurer	Date
Wendell J. Harris Senior	Paul Sickel	5/19/2015
	Daytime Phone 414-520-1752	

NOTE: The information on this form is required by ss. 11.06, 11.20, Wisconsin. Stats.

Failure to provide this information may subject you to the penalties os 11.60, 11.62, Wisconsin. Stas.

Wendell Harris for School Board

SCHEDULE 1-A **Contributions Including Loans from Individuals**

IN-KIND	CONDUIT	DATE	LAST	FIRST	ADDRESS	CITY	ST	ZIP	EMPLOYER	OCCUPATION	AMOUNT	YTD
X		12/15/2014	Peterson	Robert	2416 N dousman	Milwaukee	WI	53212	Milwaukee Teachers	President	$ 0.59	$ 0.59
		12/15/2014	Harris	Wendell	2727 N. 67th	Milwaukee	WI	53210	Wendell Harris and Associates	Restorative Justice / Conflict Resolution Specialist	$ 25.00	$ 25.00
X		12/18/2014	Sickel	Paul	2525 S. Shore Drive Apt. 7A	Milwaukee	WI	53207	Alliance for a Better WI	Field Coordinator	$ 76.20	$ 76.20
		12/19/2014	Harris	Wendell	2727 N. 67th	Milwaukee	WI	53210	Wendell Harris and Associates	Restorative Justice / Conflict Resolution Specialist	$160.00	$ 180.00

Wendell Harris for School Board

SCHEDULE 2-A

Gross Expenditures

In-Kind	DATE	NAME	ADDRESS	CITY	ST	ZIP	PURPOSE	AMOUNT
X	12/15/2014	MTEA	5130 W. Vliet Street	Milwaukee	WI	53212	Copies, printing nomination papers and filing papers	$ 0.59
X	12/18/2014	Colonial Quality Printing	2977 S. Howell Ave.	Milwaukee	WI	53207	Printing 1,000 B/W literature pieces	$ 76.20
	12/19/2014	Edward White	2020 N. 34th Street	Milwaukee	WI	53208	Canvasser Nomination papers	$ 40.00
	12/19/2014	Rafael Powell	4705 W. Burleigh #9	Milwaukee	WI	53210	Canvasser Nomination papers	$ 40.00
	12/19/2014	Larry Evans	4705 W. Burleigh #9	Milwaukee	WI	53210	Canvasser Nomination papers	$ 40.00
	12/19/2014	Justina Lee	3416 N. 10th Street	Milwaukee	WI	53206	Canvasser Nomination papers	$ 40.00

Wendell Harris for School Board

SCHEDULE 3-B

Loans: Individual, Committee or Commercial

DATE	NAME	ADDRESS	CITY	ST	ZIP	Outstanding Balance Beg of Period	Cumulative Payments This Period	Outstanding Balance End of Period	Guaruntor (if any) Name and Address
12/15/2014	Wendell Harris	2727 N. 67th Street	Milwaukee	WI	53210	$ -	$ 185.00	$ 185.00	

Wendell Harris for School Board

SCHEDULE 3-C

Estimated Value of In-Kind Contributions Received

DATE	NAME	ADDRESS	CITY	ST	ZIP	Place of Business	Individ or Comm	Description of Contribution	Estimated Amount	Estimated YTD
12/15/2015	Robert Peterson	2416 N. Dousman	Milwaukee	WI	53212	Milwaukee	Individual	cost of printin 100	$0.59	$0.59
12/18/2014	Paul Sickel	2525 S. Shore Drive Apt 7A	Milwaukee	WI	53207	Milwaukee	Individual	1,000 B/W fliers	$76.20	$76.20

SCHEDULE 3-D

Estimated Value of In-Kind Contributions Given

DATE	NAME	ADDRESS	CITY	ST	ZIP	Place of Business	Individ or Comm	Description of Contribution	Estimated Amount	Estimated YTD

SCHEDULE 3-E

Contributions Returned to Contributor

DATE OF ORIGINAL CONTRIB	NAME	ADDRESS	CITY	ST	ZIP	Amount Returned

SCHEDULE 3-F

Contributions Donated to Charity or Common School Fund

DATE	NAME	ADDRESS	CITY	ST	ZIP	Reason	Amount