

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

RECEIVED

Is This Report an Amendment: Yes No

2016 JUL 18 PM 3:05

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

COMMITTEE IDENTIFICATION

BOARD OF ELECT COMMISSIONERS
CITY OF MILWAUKEE

Name of Committee

FRIENDS OF G. SPENCER COGGS

Street Address

7819 W. POTOMAC AV.

City, State and Zip Code

MILWAUKEE, WI 53222

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 *2016* 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	\$ <i>4000.00</i>	\$
1B. Contributions from Committees (Transfers-In)	\$	\$
1C. Other Income and Commercial Loans	\$	\$
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ <i>4000.00</i>	\$
2. DISBURSEMENTS		
2A. Gross Expenditures	\$ <i>11185.28</i>	\$
2B. Contributions to Committees (Transfers-Out)	\$	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ <i>11185.28</i>	\$

CASH SUMMARY

Cash Balance Beginning of Report	\$ <i>8381.54</i>
Total Receipts	\$ <i>4000.00</i>
Subtotal	\$ <i>12381.54</i>
Total Disbursements	\$ <i>11185.28</i>
CASH BALANCE END OF REPORT	\$ <i>1196.26</i>
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>G. SPENCER COGGS</i>	Signature of Candidate or Treasurer <i>G. Spencer Coggs</i>	Date: <i>7/15/2016</i>
Email: <i>GSPENCERCOGGS@GMAIL.COM</i>		Daytime Phone: <i>(414) 640-4033</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
FRIENDS OF G. SPENCER COGGS

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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
5/3/16	G. SPENCER COGGS 7819 W. POTOMAC AV MILW, WI 53222 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	CITY TREASURER 200 E. WELLS RD MILW, WI 53202	4,000.00	
	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	\$	
TOTAL ITEMIZED CONTRIBUTIONS	\$	
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$	4000

SCHEDULE 2-A

**DISBURSEMENTS
Gross Expenditures**

Complete Committee Name
FRIENDS OF G SPENCER COGRS

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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
3/24/16	URBAN MEDIA 2419 N 2 MILWAU, WI 53206 Check if: <input type="checkbox"/> In-Kind Offset	PRINT & RADIO SUPPORT (SIGN DISTRIBUTION)	3000-
3/24/16	WZ W CONSULTING 426 N 12TH AVE E DULUTH, MN 55805 Check if: <input type="checkbox"/> In-Kind Offset	POSTAGE FOR 200 MAILER	4,185.28
5/3/16	WZ W CONSULTING 426 N. 12TH AVE E DULUTH, MN 55805 Check if: <input type="checkbox"/> In-Kind Offset	PAYMENT ON PRINTING COSTS	4,000-
	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	\$
TOTAL ITEMIZED EXPENDITURES	\$
TOTAL UNITEMIZED EXPENDITURES	\$
TOTAL EXPENDITURES	\$ 11,185.28