

**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 MICHAEL BONDS**
 Street Address: **3519 N. 50th ST**
 City, State and Zip Code: **MILWAU. WI 53216**

2015 MAR 30 PM 1:31

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 Pre-Election 2015 Spring Fall Special

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	\$ 2025	\$ 2,025
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)	\$ 2025	\$ 2,025
2. DISBURSEMENTS		
2A. Gross Expenditures	\$ 2056.48	\$ 2056.48
2B. Contributions to Committees (Transfers-Out)	\$ 0	\$ 0
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 2056.48	\$ 2056.48

CASH SUMMARY

Cash Balance Beginning of Report	\$ 668.57
Total Receipts	\$ 2025.00
Subtotal	\$ 2693.57
Total Disbursements	\$ 2056.48
CASH BALANCE END OF REPORT	\$ 637.09
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 MICHAEL BONDS	Signature of Candidate or Treasurer <i>Michael Bonds</i>	Date 03-30-15
	Email FRIENDS OF MICHAEL BONDS@gmail.com	Daytime Phone: (414) 570-389

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.

(414) 435-4429
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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	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
3/18/15	MICHAEL BONDS 3519 N. 50th St Milwaukee WI 53216	CANDIDATE REIMBURSEMENT FOR USED COMPUTER (275 dollars) \$75 - work	\$350.00	390.00
3/18/15	MICHAEL BONDS 3519 N. 50th St Milwaukee WI 53216	CANDIDATE	\$45.00	45.00
3/18/15	SUSAN SAUER 5573 W. JEFFERSON PARK DR Milwaukee WI 53218	ADMINISTRATOR - MPS 5225 W. VILLET ST Milwaukee WI 53218	\$50.00	50.00
3/18/15	FRED ALLEN 3337 N 51st AVE Milwaukee WI 53216	RETIRED EDUCATOR	\$100.00	100.00
3/18/15	LARRY MILLER 2984 N. FOREST AVE Milwaukee WI 53211	RETIRED EDUCATOR	\$100.00	100.00
3/18/15	DEWICK CALLAWAY 5208 W. TOWNSEND Milwaukee WI 53214	ADMINISTRATOR - MPS 5225 W. VILLET ST Milwaukee WI 53214	\$100.00	100.00
3/18/15	EARL INGRAM 3718 N. 53rd Milwaukee WI 53216	RETIRED	\$50.00	50.00
3/18/15	BERNARD RANDALL 112 E Brown St Milwaukee WI 53214	EXECUTIVE DIRECTOR - MFP 74 W. WATSON AVE	\$100.00	\$100.00

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 895

TOTAL ITEMIZED CONTRIBUTIONS

\$ 895

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS

\$ 0

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ 895

→ KENNEDY
Check (IF)

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	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
3/18/15	George Matthews 3164A N. 4TH MILWAUKEE WI 53216	MATE-ADVISOR 70 W. STATE ST MILWAUKEE WI 53274	\$20	20
3/18/15	ANITA SPARKS 3308 N. 4TH ST MILWAUKEE WI 53216	ADMINISTRATOR MPS 5225 W. VILLET ST MILWAUKEE WI 53218	\$50	50
3/18/15	VAL MCCORMACK 3944 N. 23RD MILWAUKEE WI 53209	ADMINISTRATOR MCCORMACK CENTER 1520 W. VILLET ST MILWAUKEE WI 53206	\$25	25
3/18/15	CHARLES MORTON 3230 W. TUNNEY RD MILWAUKEE WI 53206	EMERSON	\$50	50
3/18/15	PLAUNCE JOHNSON 6003 W. CALUMET RD MILWAUKEE WI 53223	PROFESSOR CLINICAL UWM MILWAUKEE WI 53201	\$50.00	50
3/26/15	HOWARD FULLER 3244 N. 4TH MILWAUKEE WI 53216	EDUCATOR MARGUERITE UNIVERSITY Center for Transitions 1600 W. WELLS ST MILWAUKEE WI 53201	\$400.00	400
3/26/15	JAMES HALL 1800 N Summit Street MILWAUKEE WI 53244	ATTORNEY	25	25
3/28/15	KEITH PUSTKY MILWAUKEE WI		\$50.00 (cash)	50

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE \$ 670
 TOTAL ITEMIZED CONTRIBUTIONS \$ 670
 TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS \$ 0
 TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS \$ 670

Complete Committee Name
FRIENDS of Michael BORDS

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
1 '18'15	<i>[Handwritten Name]</i>	<i>[Handwritten Occupation]</i>	<i>[Handwritten Amount]</i>	
3 '18'15	CHARLES WHITE 3512 N. 51st BLVD MIL. WI 53214	ELECTRICIAN - SELF EMPLOYED	\$100 CASH	\$100
3 '18'15	NICOLE MCDONNELL 11750 W. HERITAGE DR MIL. WI 53214	EDUCATOR - MRS 5225 W. VILLET ST MIL. WI 53214	\$100 CASH	\$100
3 '18'15	MATT JACSON 2428 N. 44th MIL. WI 53214	UNKNOWN ASSEMBLY WORKER	\$40 CASH	\$40
3 '18'15	RICARDO DEKON 1816 N. 12th MIL. WI 53205	UNKNOWN	\$20 CASH	\$20
3 '18'15	OTHERS (VARIOUS INDIVIDUALS)	UNKNOWN - CASH DONATED IN BOX FOR FUNDS	\$100 CASH	\$100
3 '18'15	LINDA STEWART 3337 N. 51st MIL. WI 53214	RETIRED EDUCATOR	\$100	\$100
3 '18'15	BETH COBBS 2700 N. 7th MIL. WI 53212	EDUCATOR - MRS DONATED FOOD - FUND RAISERS	UNKNOWN AMOUNT OF FOOD	UNKNOWN DONATED FOOD FOR PROGRAM

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 460

TOTAL ITEMIZED CONTRIBUTIONS

\$ 440

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS

\$ 20

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ 460

(IN-KIND)

SCHEDULE 1-B

RECEIPTS
Contributions from Committees
(Transfers-In)

Complete Committee Name
Friends of Michael Bonds

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
Date / /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
Date / /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
Date / /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
Date / /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
Date / /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
Date / /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
Date / /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
Date / /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total
Date / /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	Amount	Calendar Year-To-Date Total

SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE

\$ 8

TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES

\$ 8

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 wk school weeks	SEE ATTACHMENT - CAMPAIGN WORKERS	Literature Drops, Mailings, Sign Assembly, ETC	\$ 250.00
3/23/15	U.S. POSTAL SERVICES 3901 N. 35th St Milwaukee WI 53216	2 books of stamps - mailing 45 cent value	\$ 19.60
3/23/15	U.S. BANK	Returned check - of contribution insufficient fund	\$ 100
3/20/15	U.S. POSTAL SERVICES 3901 N. 35th St Milwaukee WI 53216	7 Books of 100 stamps - mailing 45 cent value 1	\$ 343.00
3/20/15	OFFICE DEPOT 5900 W. Fond du Lac Ave Milwaukee WI 53216	1800 envelopes (2 boxes) mailing for sets, etc	\$ 71.55
3/13/15	U.S. BANK 5300 W. Capital Ave Milwaukee WI 53216	Service Analysis SERVICE ANALYSIS	\$ 2.00
2/26/15	CLARK GRAPHICS 2415 N. Galland Ave Milwaukee WI 53211	15,000 Flyers	\$ 596.85
3-29-15	WZ W CONSULTING Milwaukee WI 53207	PHONE LIST - Robo Call	\$ 200.00
3/19/15	Michael Bonds 3519 N. 52nd St Milwaukee WI 53216	Reimbursement for folios ① 65 - meter R-phax ② 45 - loan to campaign ③ 5 - 95 cent ballot list → City of IM	115.00

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 1698.00
TOTAL ITEMIZED EXPENDITURES	\$ 1696.00
TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS	\$ 2.00
TOTAL EXPENDITURES	\$ 1698.00

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
3/16/15	CLARK GRAPHICS 2915 N. OAKLAND AVE MIL. WI 53211	FOR RAISE PRINTS, ENVELOPES, ETC	\$ 77.78
3/25/15	CITY OF MILWAUKEE ELECTED COMMISSION FOR E WELLS MIL. WI 53201	VOTER REGISTERED LIST	\$ 260.70
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SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 358.48
TOTAL ITEMIZED EXPENDITURES	\$ 358.48
TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS	\$ 0
TOTAL EXPENDITURES	\$ 358.48

Attachment

Campaign Workers

expenses

campaign worker - literature drop	jarrel young - 1 day	30
campaign worker - literature drop	touger xiong - student - 1 day	30
campaign worker - literature drop	israel young - student - 1 day	30
campaign worker - literature drop	john lee - student - 1 day	30
campaign worker - literature drop	nafesia hollifield - 1 day	20
campaign worker - literature drop	tyrone cobb - student - 1 days	20
campaign worker - literature drop	zelner bonds jr - 2 days	40
<u>campaign worker - signs/mailing</u>	<u>Michelle Breckingridge - 3 days</u>	<u>50</u>
		250

SCHEDULE 3-A

**ADDITIONAL DISCLOSURE
Incurred Obligations Excluding Loans**

Complete Committee Name
FRIENDS of METACALFE BONDS

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				
		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	\$	
TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS	\$	
TOTAL INCURRED OBLIGATIONS	\$	<i>0</i>

ADDITIONAL DISCLOSURE
Loans
Individual, Committee or Commercial

Complete Committee Name
FRIENDS OF MICHAEL BOND

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
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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
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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
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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	\$
TOTAL OUTSTANDING LOANS	\$