

REC'D

**CAMPAIGN FINANCE REPORT
STATE OF WISCONSIN**

2015 FEB -2 PM 2:06

Is this report an Amendment? YES NO

STATE OF WISCONSIN
DEPARTMENT OF REVENUE

COMMITTEE IDENTIFICATION

Name of Committee **Sain For School District 1**

Address **P.O. Box 240406**

City, State, ZIP **Milwaukee, WI, 53224**

OFFICE USE ONLY

WSEB # ID

Please check if address is different than previously reported

NAME OF REPORT Jan 20 15 Continuing Pre-Primary 20__ Spring Fall Special
(Please circle) July 20__ Continuing Pre-election 20__ Spring Fall Special

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

Column A **Column B** **Audited Totals**
This Period **YTD** **Office Use Only**

A. Contributions including Loans from Individuals

\$ -

B. Contributions from Committees (Transfers-In)

\$ -

C. Other Income and Commercial Loans

\$ -

TOTAL RECEIPTS (Add totals from 1A, 1B, and 1C)

\$ -

\$ -

1. DISBURSEMENTS

A. Gross Expenditures

\$ -

B. Contributions to Committees (Transfers-Out)

\$ -

TOTAL DISBURSEMENTS (Add totals from 2A and 2B)

\$ -

\$ -

CASH SUMMARY

Cash Balance at Beginning of Report

\$ 873.49

Total Receipts

Subtotal

\$ 873.49

Total Disbursements

\$ -

CASH BALANCE AT END OF REPORT

\$ 873.49

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

Keiwon Love

Signature of Candidate or Treasurer

Date

1/31/2015

Daytime Phone

414

3976500

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.