

**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

COMMITTEE IDENTIFICATION

Name of Committee

FRIENDS OF MICHAEL MURPHY

Street Address

463 NORTH STORY PKWY.

City, State and Zip Code

MILWAUKEE, WISCONSIN 53208

20 JAN 13 P 1:23

CITY OF MILWAUKEE
ELECTION COMMISSION
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 2020 Pre-Primary _____
 July Continuing _____ 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	\$ 300.00	\$ 485.83
1B. Contributions from Committees (Transfers-In)	\$ 0.00	\$ 0.00
1C. Other Income and Commercial Loans	\$ 454.61	\$ 747.60
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 754.61	\$ 1,233.43
2. DISBURSEMENTS		
2A. Gross Expenditures	\$ 1,314.50	\$ 2,769.24
2B. Contributions to Committees (Transfers-Out)	\$ 500.00	\$ 500.00
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 1,814.50	\$ 3,269.24

CASH SUMMARY

Cash Balance Beginning of Report	\$ 137,287.78
Total Receipts	\$ 754.61
Subtotal	\$ 138,042.39
Total Disbursements	\$ 1,814.50
CASH BALANCE END OF REPORT	\$ 136,227.89
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	Signature of Candidate or Treasurer	Date:
MICHAEL J. MURPHY	Michael J. Murphy	1/10/20
	Email	Daytime Phone:
	murphiceland@aol.com	286-3763

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 Murphy

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
9/27/19	NANCY FLAGG W 247 N 6006 Pewaukee Sussex, WI 53081 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	retired	\$ 300.00	\$ 300.00
	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	\$ 300.00	485.83
TOTAL ITEMIZED CONTRIBUTIONS	\$ 300.00	485.83
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$ -0-	-0-
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$ 300.00	485.83

Complete Committee Name
FRIENDS OF MICHAEL MURPHY

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
7/10/19	VERIZON WIRELESS 899 Heathrow Park Lane Check if: <input type="checkbox"/> In-Kind Offset LAKE MARY, FL 32746	PHONE CHARGES	\$ 95.67
8/1/19	" " " Check if: <input type="checkbox"/> In-Kind Offset	Phone Charges	\$ 95.87
9/4/19	M.L. WATERMONT Deli 761 W. WATER ST. Check if: <input type="checkbox"/> In-Kind Offset MIL, WI 53202	Lunch - campaign meeting	\$ 17.93
9/10/19	Venture Brue Co. 5519 W. NORTH AVE Check if: <input type="checkbox"/> In-Kind Offset M.L. WI 53208	CAMPAIGN meeting	\$ 25.30
9/19/19	VERIZON WIRELESS " " Check if: <input type="checkbox"/> In-Kind Offset	Phone charges	\$ 96.49
10/8/19	AMERICAN EXPRESS P.O. BOX 0004 LOS ANGELES, CA Check if: <input type="checkbox"/> In-Kind Offset 90096	late fees	\$ 39.00
10/19/19	VERIZON WIRELESS " " Check if: <input type="checkbox"/> In-Kind Offset	Phone charges	\$ 96.50
10/23/19	Revitalize Milwaukee 840 N. Old World St suite 600, MIL, WI 53203 Check if: <input type="checkbox"/> In-Kind Offset	Attendance at Fundraiser	\$ 300.00
SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE			\$ 766.76
TOTAL ITEMIZED EXPENDITURES			\$ 1,814.50
TOTAL UNITEMIZED EXPENDITURES			\$ - 0 -
TOTAL EXPENDITURES			\$ 1,814.50

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name
Friends of Michael Murphy

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
11/5/19	St. Paul Fish Company 400 N. WATER ST. MILWAUKEE WI 53202 Check if: <input type="checkbox"/> In-Kind Offset	Campaign Planning Meeting	\$177.28
11/18/19	Wis. Democratic Party MILWAUKEE WI. Check if: <input type="checkbox"/> In-Kind Offset	membership Democratic Party	\$45.00
11/19/19	Verizon Wireless " " Check if: <input type="checkbox"/> In-Kind Offset	Phone charges	\$96.46
11/25/19	U.S. Postal Service 606 E. JUNEAU AVE MILWAUKEE WI 53202 Check if: <input type="checkbox"/> In-Kind Offset	STAMPS	\$110.17
12/8/19	American Express Check if: <input type="checkbox"/> In-Kind Offset	RENEWAL membership.	\$175.00
12/16/19	U.S. Postal Service 606 E. JUNEAU AVE MILWAUKEE WI 53202 Check if: <input type="checkbox"/> In-Kind Offset	STAMPS	\$44.07
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 547.74
TOTAL ITEMIZED EXPENDITURES	\$ 1,814.50
TOTAL UNITEMIZED EXPENDITURES	\$ -0-
TOTAL EXPENDITURES	\$ 1,814.50

Complete Committee Name
Friends of Michael Murphy

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

Date	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
7/10/19	BMO HARRIS BANK P.O. Box 94033	INTEREST	\$ 454.61
12/31/19	Palatine, IL 60094		

SUBTOTAL OTHER INCOME THIS PAGE	\$ 454.61
TOTAL ITEMIZED OTHER INCOME	\$ -
TOTAL OTHER INCOME	\$ 454.61