

**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 Mark Borkowski

2020 FEB 11 P 12:07

Street Address

3450 S. Sunset DR

**CITY OF MILWAUKEE
ELECTION COMMISSION
OFFICE USE ONLY**

City, State and Zip Code

Milwaukee, WI 53220

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 2020 Spring Fall Special
 July Continuing Pre-Election Termination Report
 September Continuing also complete Schedule 4

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

	Column A This Period	Column B Calendar Year-To-Date
1A. Contributions (Including Loans) from Individuals	\$ 1940 -	\$
1B. Contributions from Committees (Transfers-In)	\$ 400 -	\$
1C. Other Income and Commercial Loans	\$ -	\$
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 2340 -	\$

2. DISBURSEMENTS

2A. Gross Expenditures	\$ 3547.59	\$
2B. Contributions to Committees (Transfers-Out)	\$ -	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 3547.59	\$

CASH SUMMARY

Cash Balance Beginning of Report	\$ 19,747.68
Total Receipts	\$ 2340.00
Subtotal	\$ 22,087.68
Total Disbursements	\$ 3547.59
CASH BALANCE END OF REPORT	\$ 18,540.09
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ -
LOANS (Balance at the Close of This Period-3B)	\$ 5800 -

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 Kim Rivas	Signature of Candidate or Treasurer <i>Kimberly Rivas</i> Date: 2/11/2020 Email: rivaskim79@gmail.com Daytime Phone: 414-758-8597
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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.

Contributions (Including Loans) From Individuals

Complete Committee Name
Friends of Mark Borkowski

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
1/13/2020	Rockland J Whack Heather M Kitchin	Controller office	100 ⁰⁰	100 ⁰⁰
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
2/3/2020	Habib and Shamsa Manjee	Restauranter/ Club Owner/ Hospitality	250 ⁰⁰	250 ⁰⁰
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
2/3/2020	H. Fuller	Educator at Marquette Univ.	250 ⁰⁰	250 ⁰⁰
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
2/3/2020	Joseph Balestrieri	Owner of the Rave	250 ⁰⁰	250 ⁰⁰
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
2/3/2020	Joshua Gimbel	Attorney	50 ⁰⁰	50 ⁰⁰
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
2/3/2020	Samer L Asad	Consultant	200 ⁰⁰	200 ⁰⁰
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
2/3/2020	Kathryn R Hall	Student/ Researcher	300 ⁰⁰	300 ⁰⁰
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 1400 - 1400 -

TOTAL ITEMIZED CONTRIBUTIONS

\$ 1400 - 1400 -

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$ - -

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ 1400 - 1400 -

Complete Committee Name
Friends of Mark Borkowski

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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
2/3/20	H. Carl Mueller Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____	Consultant	100 -	100 ⁰⁰
2/3/20	Rana or Afshan Anwar Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____	Gas Station Owner	300 -	300 ⁰⁰
2/3/20	Daniel Adams (CASH) Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____	Attorney	40 -	40 -
2/3/	Nick Anton (CASH) Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____	Hospitality Industry	100 -	100 -
	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

\$ 540 - 540 -

TOTAL ITEMIZED CONTRIBUTIONS

\$ 1400 - 1400 -

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$ - -

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ 1940 - 1940 -

RECEIPTS
Contributions from Committees
(Transfers-In)

Complete Committee Name
Friends of Mark Borkowski

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

Date	Full Name of Committee, Mailing Address and Zip Code	Amount of Contribution
11/13/2020	James Bohl JR Friends of Jim Bohl Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan	200 -
11/13/2020	Citizens for D'Amato Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	200 -
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE		\$ 400 -
TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES		\$ 400 -

SCHEDULE 2-A

**DISBURSEMENTS
Gross Expenditures**

Complete Committee Name

Friends of Mark Borkowski

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
11/11/2020	Lee Whiting Check if: <input type="checkbox"/> In-Kind Offset	Payroll	675.00
11/27/2020	Lee Whiting Check if: <input type="checkbox"/> In-Kind Offset	Payroll	367.50
2/2/2020	Pointer Marketing, Inc Check if: <input type="checkbox"/> In-Kind Offset	mailing	2115.09
2/2/2020	Lee Whiting Payroll Check if: <input type="checkbox"/> In-Kind Offset	Payroll	390.00
	 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	\$ 3547.59
TOTAL ITEMIZED EXPENDITURES	\$ 3547.59
TOTAL UNITEMIZED EXPENDITURES	\$ —
TOTAL EXPENDITURES	\$ 3547.59

**Loans
Individual, Committee or Commercial
ADDITIONAL DISCLOSURE**

Complete Committee Name
Friends of Mark Borkowski

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

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
<u>7/3/2020</u>	<u>Mark Borkowski 3650 S. Sunset DR Milw., WI 53220</u>	<u>5800-</u>	<u>0</u>	<u>0</u>	<u>5800-</u>

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
<u>/ /</u>					

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
<u>/ /</u>					

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

SUBTOTAL OUTSTANDING LOANS THIS PAGE \$ 5800-

TOTAL OUTSTANDING LOANS \$ 5800-