CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN

Is This Report an Amendment: ☐ Yes ☒ No

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CITY OF MILWAUKEE
ELECTION COMMISSION

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

OFFICE USE ONLY

COMMITTEE IDENTIFICATION

Name of Committee: Friends of Mark Borkowski

Street Address: 3650 S. Sunset DR.

City, State and Zip Code: Milwaukee, WI 53207

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 _____
☐ July Continuing _____
☐ September Continuing _____
☒ Pre-Primary 3/2020
☐ Pre-Election _____
☐ 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	$ 6046.57	$ 7986.57
1B. Contributions from Committees (Transfers-In)	$ 2166.00	$ 2566.00
1C. Other Income and Commercial Loans	$ —	$ —
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	$ 8212.57	$ 10,552.57
2. DISBURSEMENTS		
2A. Gross Expenditures	$ 19,850.94	$ 23,398.53
2B. Contributions to Committees (Transfers-Out)	$	$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	$ 19,850.94	$ 23,398.53

CASH SUMMARY

Cash Balance Beginning of Report	$ 18,540.09
Total Receipts	$ 8212.57
Subtotal	$ 26,752.66
Total Disbursements	$ 19,850.94
CASH BALANCE END OF REPORT	$ 6901.72
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	Signature of Candidate or Treasurer	Date:
Kim Rivas	Kim Rivas	3/27/20

Email: rivaskim79@gmail.com Daytime Phone: 414-758-8597

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.

SCHEDULE 1-A

RECEIPTS
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
2/5/20	Dean or Megan Newport Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Retired	50.00	50.00
2/25/20	Karl Rajani Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	President of Horizon Health Care	316.00	816.00
2/25/20	James Madlom Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Lobbyist / Consultant	150.00	150.00
3/11/20	Shaun Giffin Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Peridot construction mgmt	250.00	250.00
3/11/20	Frank Crivello Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Developer	816.00	816.00
3/12/20	John Megan Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Healthcare	25.00	45.00
3/12/20	John Megan SR Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	~~Healthcare~~ Retired	40.00	~~$250.00~~ 40.00
		SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	$ 1647-	2167-
		TOTAL ITEMIZED CONTRIBUTIONS	$ —	—
		TOTAL ANONYMOUS CONTRIBUTIONS $10 OR LESS	$ —	—
		TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	$ 1647-	2167-

SCHEDULE 1-A

RECEIPTS
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
3/12/20	Jeffrey Pawlinski Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Home Health, Sales	50.00	100.00
3/12/20	Brian Randall Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Attorney	50.00	50.00
3/12/20	Stuart S. Makamal Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Retired	60.00	60.00
3/12/20	Miriam Horwitz Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Attorney	100.00	100.00
3/12/20	Teresa Preis Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Retired	100.00	300.00
3/12/20	William Ward Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Retired	100.00	200.00
	Afshan and Rana Anwar Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Gas Station Owner	200.00	500.00

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	$ 660.-	1310.-
TOTAL ITEMIZED CONTRIBUTIONS	$ 1647.-	2167.-
TOTAL ANONYMOUS CONTRIBUTIONS $10 OR LESS	$ —	—
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	$ 2307.-	3477.-

SCHEDULE 1-A

RECEIPTS
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
3/12/20	James G Baker, Jr Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Curtis Ambulance Owner	200.00	200.00
3/12/20	Donald Raffaelli Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Owner of McCarty Park Bar/Restaurant	200.00	400.00
3/12/20	James Lombardo Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	VP Bell Ambulance	200.00	200.00
3/12/20	Richard Baker Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Retired - Municipal Judge in Wauwatosa	200.00	400.00
3/12/20	Hossam F Kamel Ali Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Physician	250.00	250.00
3/12/20	Pardeep Kaleka Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Gas Station Owner	252.00	252.00
3/12/20	Gurinder Nagra and Kalwinder Kaur Nagra Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Gas Station Owner	252.00	250.00

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	$ 1550-	1950-
TOTAL ITEMIZED CONTRIBUTIONS	$ 2307-	3477-
TOTAL ANONYMOUS CONTRIBUTIONS $10 OR LESS	$ -	-
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	$ 3857-	5427-

SCHEDULE 1-A

RECEIPTS
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
3/12/20	Marwa Bakr Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Pharmacist	500.00	500.00
3/12/20	Frank Laffranchini Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Attorney	500.00	500.00
3/12/20	Chnstopher or Ann MacGillis Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Attorney	500.00	500.00
3/12/20	Chns Wiken (CASH) Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Restaurant Manager	100.00	100.00
3/12/20	Kathy Block (CASH) Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Attorney	100.00	100.00
3/12/20	Bruce Brown (CASH) Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Retired	100.00	200.00
3/12/20	Unknown CASH Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	—	70.-	70.00

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	$ 1870.-	1970.-
TOTAL ITEMIZED CONTRIBUTIONS	$ 3857.-	5427.-
TOTAL ANONYMOUS CONTRIBUTIONS $10 OR LESS	$ -.-	-.-
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	$ 5727.-	7397.-

SCHEDULE 1-A

RECEIPTS
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
3/17/80	Inderjeet Singh or Harsharanj Kaur Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Developer	200.00	200.00
3/17/80	Donald L. Carlson Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	Retired	119.57	227.14
	Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#			
	Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#			
	Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#			
	Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#			
	Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	$ 319.57	427.14
TOTAL ITEMIZED CONTRIBUTIONS	$ 5727.00	7397 –
TOTAL ANONYMOUS CONTRIBUTIONS $10 OR LESS	$ —	—
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	$ 6046.57	7824.14

SCHEDULE 1-B

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
2/25/20	Wisconsin Hospitals Conduit Check if: ☐ In-Kind ☐ Loan	100.00
3/2/20	A 3 Petroleum, Inc Check if: ☐ In-Kind ☐ Loan	500.00
3/2/20	Milwaukee Police Association Check if: ☐ In-Kind ☐ Loan	500.00
3/23/20	Wisconsin Restaurant Association, Inc. Conduit Account Check if: ☐ In-Kind ☐ Loan	250.00
3/23/20	Milwaukee Perfesionla Fire Fighter Association Check if: ☐ In-Kind ☐ Loan	816.00
	Check if: ☐ In-Kind ☐ Loan	
	Check if: ☐ In-Kind ☐ Loan	
	Check if: ☐ In-Kind ☐ Loan	
	Check if: ☐ In-Kind ☐ Loan	
	SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE	$ 2166.00
	TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES	$ 2166 —

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
2/14/20	Lee Whiting Check if: ☐ In-Kind Offset ✓1019	Payroll	255.00
2/14/20	Mark Borkowski Check if: ☐ In-Kind Offset ✓1020	Lawn Signs	964.02
2/24/20	Lee Whiting Check if: ☐ In-Kind Offset 1021	Payroll	405.00
2/24/20	Zigman Joseph + Associates Check if: ☐ In-Kind Offset 1022	Fund Raiser	526.51
3/1/20	Lee Whiting Check if: ☐ In-Kind Offset 1023	Payroll	555-
3/10/20	Lee Whiting Check if: ☐ In-Kind Offset 1024	Payroll	337.50
3/10/20	Carly Pelczynski Check if: ☐ In-Kind Offset 1025	Payroll	22.50
3/10/20	Mark Borkowski Check if: ☐ In-Kind Offset 1026	HandOuts / Graphicolor	289.83

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	$ 3355.36
TOTAL ITEMIZED EXPENDITURES	$ -
TOTAL UNITEMIZED EXPENDITURES	$ -
TOTAL EXPENDITURES	$ 3355.36

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
3/11/20	Sigman Joseph + Associates Check if: ☐ In-Kind Offset 1028	Mailing	5299.86
3/11/20	Tatino's Pizza Check if: ☐ In-Kind Offset 1029	Food for Fund Raiser	270.00
3/17/20	Lee Whiting Check if: ☐ In-Kind Offset 1030	Payroll	315.00
3/17/20	Sigman Joseph + Associates Check if: ☐ In-Kind Offset 1031	Mailing	5299.86
3/23/20	Sigman Joseph + Associates Check if: ☐ In-Kind Offset 1027	mailing	5299.86
3/10/20	Old National Bank Check if: ☐ In-Kind Offset	Fee	11.00
	Check if: ☐ In-Kind Offset		
	Check if: ☐ In-Kind Offset		

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	$ 16,495.58
TOTAL ITEMIZED EXPENDITURES	$ 3355.36
TOTAL UNITEMIZED EXPENDITURES	$
TOTAL EXPENDITURES	$ 19,850.94

SCHEDULE 3-B

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
3/27/20	Mark Borkowski 3650 S. Sunset Dr. Milw. WI 53220	5800-	—	—	5800-

List All Endorsers or Guarantors (if any)

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

List All Endorsers or Guarantors (if any)

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

List All Endorsers or Guarantors (if any)

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

SUBTOTAL OUTSTANDING LOANS THIS PAGE	$ 5800-
TOTAL OUTSTANDING LOANS	$ 5800-