

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

RECEIVED

Is This Report an Amendment: Yes No

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

2016 FEB -9 A 11:49

COMMITTEE IDENTIFICATION

Name of Committee
Friends of Randy Jones

CITY OF MILWAUKEE
ELECTION COMMISSION

Street Address
2962 N. 51st Street

OFFICE USE ONLY

City, State and Zip Code
Milwaukee, WI. 53210

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 2016 Spring Fall Special
 July Continuing 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	\$2,684.55	\$8,707.42
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)	\$2,684.55	\$8,707.42
2. DISBURSEMENTS		
2A. Gross Expenditures	\$2,633.35	\$8,499.16
2B. Contributions to Committees (Transfers-Out)	\$0	\$0
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$2,633.35	\$8,499.16

CASH SUMMARY

Cash Balance Beginning of Report	\$ 157.83
Total Receipts	\$ 2,684.55
Subtotal	\$ 2,842.55
Total Disbursements	\$ 2633.35
CASH BALANCE END OF REPORT	\$ 209.20
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ 0
LOANS (Balance at the Close of This Period-3B)	\$ 3764.70

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 Randy Jones	Signature of Candidate or Treasurer 	Date: <u>2-9-16</u>
	Email <u>jones.randy49@yahoo.com</u>	Daytime Phone: <u>(414) 477-6442</u>

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.

Complete Committee Name
Friends of Randy Jones

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 / 7 / 16	Erin Tarnowski 18 Williams Wood Mahtomedi MN. 55115		400.00	400.
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
1 / 8 / 16	Lynn Connolly 1034 E. Ogden Ave Milw. 53202	Retired	400.00	800.
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
4 / 8 / 15	Eric Ashley 5390 S. Hidden Dr Greenfield, WI. 53221		50.00	50.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
4 / 24 / 15	Nichole Connolly 3508 N 100th Street Milw. 53222	Homemaker	400.00	800.
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
4 / 24 / 15	Randy Jones 2962 n 51st Street	self	1000.00	4,252.83
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
5 / 6 / 15	Randy Jones 2962 n 51st Street	self	130.00	4,606.88
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
5 / 8 / 15	Randy Jones 2962 n 51st Street	self	354.05	4,736.88
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
/ /				
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE \$ 2,684.55

TOTAL ITEMIZED CONTRIBUTIONS \$ 0

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS \$ 0

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS \$ 2,684.55

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name
Friends of Randy Jones

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 / 28 / 16	Eagle Flair Printing-6933 W Brown Deer Rd, MKE Check if: <input type="checkbox"/> In-Kind Offset	Hand Flyers	63.36
2 / 2 / 16	Weber Printing- 3048 n 34th St, MKE Check if: <input type="checkbox"/> In-Kind Offset	Tri Folder brochures & Print Mailers	1,035.93
2 / 2 / 16	WNOV Check if: <input type="checkbox"/> In-Kind Offset	Radio Spots	125.00
2 / 5 / 16	SS Speedy-2256 s 116th Street, MKE Check if: <input type="checkbox"/> In-Kind Offset	Mailer	1,115.72
2 / 5 / 16	Weber Printing- 3048 n 34th St, MKE Check if: <input type="checkbox"/> In-Kind Offset	Copies Letters	127.78
2 / 6 / 16	Sentry Food Check if: <input type="checkbox"/> In-Kind Offset	Lunch for Volunteers	12.27
2 / 6 / 16	Little Ceasar Pizzas Check if: <input type="checkbox"/> In-Kind Offset	Lunch for Volunteers	31.83
2 / 6 / 16	Eagle Flair Printing-6933 W Brown Deer Rd, MKE Check if: <input type="checkbox"/> In-Kind Offset	Flyer for Mayor Franklin Deese	63.36
2 / 7 / 16	Sentry Food Check if: <input type="checkbox"/> In-Kind Offset	Lunch for Volunteers	26.27
SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE			\$ 2,601.52
TOTAL ITEMIZED EXPENDITURES			\$
TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS			\$
TOTAL EXPENDITURES			\$

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name
Friends of Randy Jones

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 / 7 / 16	Little Ceasar Pizzas Check if: <input type="checkbox"/> In-Kind Offset	Lunch for Volunteers	31.83
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE			\$ 31.83
TOTAL ITEMIZED EXPENDITURES			\$ 2,601.52
TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS			\$
TOTAL EXPENDITURES			\$ 2,633.35

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

Complete Committee Name **Friends of Randy Jones**

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
2 / 8 / 16	Randy Jones 2962 N 51st St. MKE 53210	2,280.65	1,484.05	0	3,764.70

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
/ /					

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
/ /					

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 **\$ 3,764.70**

TOTAL OUTSTANDING LOANS **\$ 3,764.70**