

**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.

**COMMITTEE IDENTIFICATION**

Name of Committee

FRIENDS OF KHALIF RAINEY

Street Address

3927 N 58TH STREET

City, State and Zip Code

MILWAUKEE, WI 53216

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  Pre-Primary  Spring  Fall  Special  
 July Continuing 2016  Pre-Election  Spring  Fall  Special

Termination Report  
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	\$ 10,251.00	\$ 35,731.00
1B. Contributions from Committees (Transfers-In)	\$ 3,052.00	\$ 8,705.00
1C. Other Income and Commercial Loans	\$ 233.33	\$ 829.34
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)	\$ 13,536.33	\$ 45,323.34

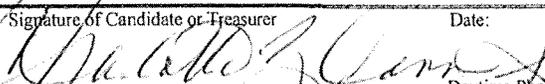
**2. DISBURSEMENTS**

2A. Gross Expenditures	\$ 22,120.23	\$ 38,785.97
2B. Contributions to Committees (Transfers-Out)	\$ 150.00	\$ 150.00
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	\$ 22,270.23	\$ 38,935.97

**CASH SUMMARY**

Cash Balance Beginning of Report	\$ 16,372.19
Total Receipts	\$ 13,536.33
Subtotal	\$ 29,908.52
Total Disbursements	\$ (22,270.23)
<b>CASH BALANCE END OF REPORT</b>	\$ 7,638.29
<b>INCURRED OBLIGATIONS</b> (Balance at the Close of This Period-3A)	\$ 0
<b>LOANS</b> (Balance at the Close of This Period-3B)	\$ 1,500.00

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:
Charlotte V. Cannon-Sain		8/16/17
		Daytime Phone: 414 345 4243

**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.

**SCHEDULE 1-A**

**RECEIPTS**

**Contributions (Including Loans) From Individuals**

Complete Committee Name  
**FRIENDS OF KHALIF RAINEY**

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
4/6/16	Mottar Technologies DOUGLASS SPORTSWEAR 7713 W. CAPITAL DR MILW, WI 53222	N/A	200.00	200.00
4/6/16	PHAT BOY LLC 3501 W CAPITAL DR MILW, WI 53216	N/A	\$150.00	\$150.00
4/6/16	JILL SCHWANJA 2009 E. FOREST HILL OAK CREEK, WI 53154	N/A	\$30.00	30.00
4/6/16	CHARNIT KAUR W127N6370 SUMAC CT MENOMONIE FALLS, WI 53051	BUSINESS OWNER LAHAL LLC. 1301 W. ATKINSON MILWAUKEE, WI 53206	\$801.00	801.00
4/6/16	JJ FOOD & BEER INC 3100 N 27th MILW, WI 53216	N/A	\$150.00	150.00
4/6/16	BRUCE COLBMAN 3905 N FARWELL AVE MILWAUKEE, WI 53211	N/A	\$100.00	\$100.00
4/6/16	Genyne Edwards 2001 N BOOTH ST MILWAUKEE, WI 53212	N/A	\$75.00	\$75.00
4/6/16	PAULA PENEBAKER 2114 N 58th ST MILWAUKEE, WI 53208	N/A	\$50.00	50.00

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE \$1,556.00  
 TOTAL ITEMIZED CONTRIBUTIONS \$ 0  
 TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS \$1,556.00

Complete Committee Name  
**FRIENDS OF KHALIF RAINEY**

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
4/6/16	DIANA CONDON 2903 W 5TH ST MILWAUKEE, WI 53212	BUSINESS OWNER SAVOUS RED HEAD INK 2901 N 5TH ST MILWAUKEE, WI 53212	\$600.00	600.00
4/6/16	GURINDER NAGRA 3776 CYPRESS LANE FRANKLIN, WI 53132	BUSINESS OWNER TEUTONIA CASI FOOD 4295 N. TEUTONIA AVE MILWAUKEE, WI 53209	\$801.00	801.00
4/6/16	KARAN KUMAR 222 S 3RD ST #511 MILWAUKEE, WI 53204	BUSINESS OWNER PUEBLO FOODS & LIQUOR 2029 N HOLTEN ST MILWAUKEE, WI 53212	\$801.00	801.00
4/6/16	RUHEET SHARMA 2604 N. CAPITOL DR #3 MILW, WI 53215	BUSINESS OWNER HOOKS FISH AND CHICKEN 2604 N CAPITOL DR MILW WI 53215	\$501.00	501.00
4/6/16	PATRICIA FAULHABER 106 W. SEEBOTH ST #1005 MILW, WI 53204	REGISTERED NURSE HORIZON Healthcare LLC 456 S. Howell Ave MILW WI 53207	\$250.00	250.00
4/6/16	KARL RAJANI 106 W. SEEBOTH ST #1005 MILW, WI 53204	PRESIDENT A&D BEHAVIORAL HEALTH CARE INC. - MATT TALBOT 2613 W. NORTH AVE MILW, WI 53210	\$801.00	801.00
4/6/16	NICHOLAS ANTON 734 S. 5TH ST MILW, WI 53204	BUSINESS OWNER LA PELLEA 734 S 5TH STREET MILW, WI 53204	\$801.00	801.00
4/6/16	HARPREET LLC 3200 N 27TH STREET MILW, WI 53216	HARPREET SINGH 565 W RIVERWOOD DR OAKCREEK, WI 53154 OWNER	\$400.00	400.00

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE \$4,955.00

TOTAL ITEMIZED CONTRIBUTIONS \$6,511.00

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS \$ 0

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS \$6,511.00

**Contributions (Including Loans) From Individuals**

Complete Committee Name  
**FRIENDS OF KHALIF RAINEY**

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
4/6/16	THELMA STAS 1733 N 17th ST MILWAU, WI 53205	N/A	\$150.00	150.00
5/11/16	KAHRI PHELPS 2837 N 2ND STREET MILWAU, WI 53212	CONSULTANT - SELF EMPLOYED 2837 N 2ND STREET MILWAU, WI 53212	750.00	750 -
5/11/16	CLIFTON PHELPS 2470 N CALANT BLVD MILWAU WI 53208	PRESIDENT EQUITY SAVINGS GROUP 1849 N MLK JR DRIVE MILWAU, WI 53212	750.00	750 -
5/11/16	JAMES PHELPS 2839 N 2nd ST MILWAU, WI 53212	PRESIDENT JCP Construction LLC 1849 N MLK DR MILWAU, WI 53212	750.00	750 -
5/11/16	Kenneth Little 9326 W. RYAN CT MILWAU, WI 53224	N/A	40.00	40.00
5/11/16	Jalin Phelps 2839 N 2nd St MILWAU, WI 53212	Contractor Self employed 1849 N MLK DR MILWAU	750.00	750 -
5/11/16	AND TONIQUE WILLIAMS P.O. BOX 1087 MILWAU, WI 53201	N/A	\$100.00	100 -

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 3,290.00
TOTAL ITEMIZED CONTRIBUTIONS	\$ 9,201.00
TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS	\$ 0
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$ 9,201.00

**SCHEDULE 1-A**

**RECEIPTS**

**Contributions (Including Loans) From Individuals**

Complete Committee Name  
**FRIENDS OF KHALIF RAHNEY**

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
5/11/16	SHELLA ASHLEY 7149 N 46th Street Milw, WI 53223	N/A	50.00	50.00
5/11/16	STEPHEN ADAMS 1733 N 17th St MILWAUKEE, WI 53205	N/A	100.00	100.00
5/11/16	HABIB MANIJE 3265 DARTMOUTH DR BROOKFIELD, WI 53005	GENERAL MANAGER STAR 27 CORP 3927 W. KILLARD AVE MILW, WI 53209	300.00	300.00

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 450.00

TOTAL ITEMIZED CONTRIBUTIONS

\$ 10,251.00

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS

\$ 0

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ 10,251.00

**SCHEDULE 1-B**

**RECEIPTS**  
**Contributions from Committees**  
**(Transfers-In)**

Complete Committee Name  
**FRIENDS OF KHALIF MAINEY**

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

Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
4/6/16	PLUMBERS LOCAL 75 POLITICAL ACTION COMMITTEE 11175 W PARKLAND AVE MILWAUKEE, WI 53224 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	\$500.00	500.00
4/6/16	FRIENDS OF MILELE COGGS 2110 W PALMER ST MILWAUKEE, WI 53212 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	\$200.00	\$200.00
4/6/16	MILW PERFESSIONLA FIRE FIGHTER ASSC. LOCAL 215 - CAMPAIGN CNT. 5625 N. WISC. AVE MILW, WI 53213 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	\$801.00	4801.00
4/6/16	MTEA-PAC FUND 5130 W VLIET ST MILWAUKEE, WI 53208 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	\$801.00	\$801.00
5/11/16	NWM LIFE POLITICAL CONTRIBUTION ACCT 720 E. WISC. AVE MILW, WI 53202 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	\$500.00	\$500.00
5/11/16	NOVAC FOR ALDERMAN 2511 N FARWELL AVE UNIT J MILW, WI 53211 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	\$100.00	\$100.00
5/11/16	DAMATO FOR ALDERMAN 3007 N STOWELL AVE MILW, WI 53211 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	\$150.00	150.00
SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE		\$ 3,052.00	
TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES		\$ 3,052.00	



**SCHEDULE 2-A**

**DISBURSEMENTS  
Gross Expenditures**

Complete Committee Name  
**FRIENDS OF KHALIP RAINLY**

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
3/22/16	ARLANDUS MORTON 1639 N MAYFAIR CT MILW, WI 53225 Check if: <input type="checkbox"/> In-Kind Offset	CANVASSING	\$ 125.00
3/22/16	OFFICE DEPOT 362 E CAPITOL DR MILW WI 53212 Check if: <input type="checkbox"/> In-Kind Offset	PRINTING E. MAILING SUPPLIES	\$ 356.23
3/23/16	ROBERT WILLIAMS 1032 N 27TH ST APT 204 MILW, WI 53210 Check if: <input type="checkbox"/> In-Kind Offset	CANVASSING	\$ 50.00
3/23/16	WEBER PRINTING 3048 N 31ST MILW WI 53210 Check if: <input type="checkbox"/> In-Kind Offset	PRINTING JOB	\$ 428.69
3/24/16	PIVOT 1720 I STREET NW STE 550 WASHINGTON DC 20006 Check if: <input type="checkbox"/> In-Kind Offset	PRINTING, ART DESIGN ETC	\$ 9,617.04
3/25/16	ROMAN MARTINEZ 3612 N 55TH ST MILW, WI 53216 Check if: <input type="checkbox"/> In-Kind Offset	VIDEOGRAPHY	\$ 130.00
3/25/16	LYLE AUSTIN P.O. BOX 13383 MILW, WI 53213 Check if: <input type="checkbox"/> In-Kind Offset	WEBSITE DESIGN	\$ 400.00
3/28/16	KALOMBO KADINA 2415 N 49TH ST MILW, WI 53216 Check if: <input type="checkbox"/> In-Kind Offset	CANVASSING	\$ 260.00
3/28/16	MARQUES DANIELS 578 W 28TH STREET MILW, WI 53233 Check if: <input type="checkbox"/> In-Kind Offset	CANVASSING	\$ 200.00

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 11,586.96
TOTAL ITEMIZED EXPENDITURES	\$ 11,586.96
TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS	\$ 0
TOTAL EXPENDITURES	\$ 11,586.96

**SCHEDULE 2-A**

**DISBURSEMENTS**  
Gross Expenditures

Complete Committee Name  
**FRIENDS OF KAALIF RAINEY**

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
3/28/16	DESTINY MANUEL 6115 W LOCUST ST MILW, WI 53210 Check if: <input type="checkbox"/> In-Kind Offset	PHONE BANKING- 3 DAYS	\$150.00
3/28/16	FABRETA NORWOOD 2219 N SHIL ST MILW WI 53210 Check if: <input type="checkbox"/> In-Kind Offset	PHONE BANKING- 3 DAYS	\$50.00
3/29/16	TANISHA MARTIN 1639 N MAYFLOWER CT MILW WI 53218 Check if: <input type="checkbox"/> In-Kind Offset	CANVASSING	\$50.00
3/29/16	HOME DEPOT 4155 N PORT WASHINGTON RD MILW, WI 53212 Check if: <input type="checkbox"/> In-Kind Offset	SUPPLIES	\$25.00
3/29/16	NMSB 2200 W BROWN DEER RD MILW WI 53225 Check if: <input type="checkbox"/> In-Kind Offset	RETURNED ITEM FEE	\$14.00
3/29/16	NMSB 2200 W BROWN DEER RD MILW, WI 53225 Check if: <input type="checkbox"/> In-Kind Offset	RETURN DEPOSIT ITEM	\$20.00
3/29/16	NMSB 2200 W BROWN DEER RD MILW, WI 53225 Check if: <input type="checkbox"/> In-Kind Offset	RETURN DEPOSIT ITEM	\$480.25
3/31/16	NMSB 2200 W BROWN DEER RD MILW, WI 53225 Check if: <input type="checkbox"/> In-Kind Offset	BANK SERVICE CHARGE	\$30.18
4/1/16	MARQUIS DANIELS 578 W 28th Street MILW, WI 53233 Check if: <input type="checkbox"/> In-Kind Offset	CANVASSING	\$250.00

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 1,069.63
TOTAL ITEMIZED EXPENDITURES	\$ 12,656.59
TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS	\$ 0
TOTAL EXPENDITURES	\$ 12,656.59

**SCHEDULE 2-A**

**DISBURSEMENTS  
Gross Expenditures**

Complete Committee Name  
**FRIENDS OF KHALIF LAINEY**

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
4/1/16	<b>PIVOT GROUP</b> 1720 I STREET NW STE 550 WASHINGTON DC 20006 Check if: <input type="checkbox"/> In-Kind Offset	<b>COPYWRITING, PRINTING, ART DESIGN</b>	\$1,719.00
4/1/16	<b>WEBER PRINTING</b> 3048 N 34TH ST MILWAUWIS 53210 Check if: <input type="checkbox"/> In-Kind Offset	<b>LARGE COROPLAST SIGNS</b>	\$399.17
4/4/16	<b>WNOV RADIO/860 AM.</b> 3042 W LOCUST MILWAUWIS 53206 Check if: <input type="checkbox"/> In-Kind Offset	<b>ADVERTISEMENT</b>	\$1,000.00
4/4/16	<b>ROMAN MARTINEZ</b> 2942 N 55TH STREET MILWAUWIS 53210 Check if: <input type="checkbox"/> In-Kind Offset	<b>VIDEOGRAPHY</b>	\$150.00
4/5/16	<b>JTANISHA MARTIN</b> 1639 N MAYFLOWER CT MILWAUWIS 53218 Check if: <input type="checkbox"/> In-Kind Offset	<b>CANVASSING</b>	\$150.00
4/6/16	<b>DESTINY MANUEL</b> 6015 W LOCUST ST MILWAUWIS 53210 Check if: <input type="checkbox"/> In-Kind Offset	<b>PHONE BANKING</b>	\$150.00
4/7/16	<b>SIMON WARREN</b> 2035 W FOND DU LAC AVE MILWAUWIS 53205 Check if: <input type="checkbox"/> In-Kind Offset	<b>FIELD DIRECTOR PAYMENT</b>	\$2,400.00
4/8/16	<b>ANTHONY PEARSON</b> 3165 N 41ST STREET MILWAUWIS 53216 Check if: <input type="checkbox"/> In-Kind Offset	<b>CANVASSING</b>	\$120.00
4/8/16	<b>TANISHA MARTIN</b> 1639 N MAYFLOWER CT MILWAUWIS 53218 Check if: <input type="checkbox"/> In-Kind Offset	<b>CANVASSING</b>	\$200.00

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 6,288.17
TOTAL ITEMIZED EXPENDITURES	\$ 18,944.76
TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS	\$ 0
TOTAL EXPENDITURES	\$ 18,944.76

**SCHEDULE 2-A**

**DISBURSEMENTS**  
Gross Expenditures

Complete Committee Name  
**FRIENDS OF KHALIF RAINEY**

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
4/11/16	MARCQUIS DANIELS 518 W 28th Street MILW, WI 53233 Check if: <input type="checkbox"/> In-Kind Offset	CANVASSING	\$400.00
4/15/16	SIMON WARREN 2035 W FON DU LAC BOUE MILW, WI 53205 Check if: <input type="checkbox"/> In-Kind Offset	FIELD DIRECTOR BALANCE	\$200.00
4/29/16	KHALIF RAINEY 3927 N 57th Street MILW, WI 53216 Check if: <input type="checkbox"/> In-Kind Offset	OUT-OF-POCKET EXPENSE REIMBURSEMENT OF EXPENSES NON-LOAN AMT	\$1,117.19
4/13/16	NMSB 2200 W BROWN AVE MILW, WI 53225 Check if: <input type="checkbox"/> In-Kind Offset	HARLAND CHECK ORDER	\$29.95
4/29/16	NMSB 2200 W BROWN AVE RD MILW, WI 53225 Check if: <input type="checkbox"/> In-Kind Offset	BANK SERVICE CHARGE	\$10.61
4/1/16	HOME DEPOT 4155 N PLYM WASHINGTON RD MILW, WI 53212 Check if: <input type="checkbox"/> In-Kind Offset	SUPPLIES	\$58.82
4/05/16	OFFICE DEPOT 362 E. CAPITOL DRIVE MILW, WI 53210 Check if: <input type="checkbox"/> In-Kind Offset	SUPPLIES	\$240.37
5/11/16	ACT BLUE 366 SUMMER STREET SUMMERVILLE, MA 02144-3132 Check if: <input type="checkbox"/> In-Kind Offset	ONLINE SERVICE CHARGES	124.05
6/21/16	WEBER PRINTING 3048 N 34th St MILW, WI 53210 Check if: <input type="checkbox"/> In-Kind Offset	Printing	\$95.04

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE \$ 2,275.43

TOTAL ITEMIZED EXPENDITURES \$ 2,220.19

TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS \$ 0

TOTAL EXPENDITURES \$ 2,220.19

Complete Committee Name  
**FRIENDS OF KRALIF RAINEY**

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
6/30/16	NMSB 8200 W BROWN DEER RD MILW, WI 53225 Check if: <input type="checkbox"/> In-Kind Offset	BANK SERVICE CHARGE	.02
6/30/16	NMSB 8200 W BROWN DEER RD MILW, WI 53225 Check if: <input type="checkbox"/> In-Kind Offset	BANK SERVICE CHARGE	.02
	MORRIS TECHNOLOGIES BULLCHAIDS SPORTSWEAR 7713 W CAPITOL DR MILW, WI 53222 Check if: <input type="checkbox"/> In-Kind Offset	REFUND OF CAMPAIGN FUNDS	\$200.00
	PIHAT BOY LLC 3501 W CAPITAL DRIVE MILW, WI 53216 Check if: <input type="checkbox"/> In-Kind Offset	REFUND OF CAMPAIGN FUNDS	\$150.00
	JJ FOODS: BOAL 3100 N 27TH STREET MILW, WI 53216 Check if: <input type="checkbox"/> In-Kind Offset	REFUND OF CAMPAIGN FUNDS	\$150.00
	HARMEET LLC 3200 N 27TH STREET MILW, WI 53216 Check if: <input type="checkbox"/> In-Kind Offset	REFUND OF CAMPAIGN FUNDS	\$400.00

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE \$ 900.04

TOTAL ITEMIZED EXPENDITURES \$ 22,120.23

TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS \$ 0

TOTAL EXPENDITURES \$ 22,120.23

**SCHEDULE 2-B**

**DISBURSEMENTS  
Contributions To Committees  
(Transfers-Out)**

Complete Committee Name  
**FRIENDS OF KHALIF RAINEY**

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

Date	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
4/19/16	GWEN MOORE FOR CONGRESS 3629 N STW MILW WI 53216	\$150.00	150.00 ✓
/ /	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
/ /	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE		\$ 150.00	
TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES		\$ 150.00	

**ADDITIONAL DISCLOSURE  
Incurred Obligations Excluding Loans**

Complete Committee Name  
*FRIENDS OF KHALIF RAINEY*

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

		Outstanding Balance Beginning This Period	New Obligations or Additions This Period	Cumulative Payments This Period	Outstanding Balance At Close of This Period
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			

SUBTOTAL ITEMIZED OBLIGATIONS THIS PAGE

\$

TOTAL ITEMIZED OBLIGATIONS

\$

TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS

\$

TOTAL INCURRED OBLIGATIONS

\$

**SCHEDULE 3-B**

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

Complete Committee Name  
FRIENDS OF KHALIF RAINEY

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
/ /	<u>KHALIF RAINEY</u> <u>3927 N 58<sup>th</sup></u> <u>MILWAUKEE WI 53216</u>	<u>1,500<sup>00</sup></u>	<u>0</u>	<u>0</u>	<u>1,500<sup>00</sup></u>

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** \$