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**CAMPAIGN FINANCE REPORT
STATE OF WISCONSIN**

Is This Report an Amendment: Yes No

2013 JAN 28 AM 10:38

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

BOARD OF ELECTION COMMISSIONERS
CITY OF MILWAUKEE

COMMITTEE IDENTIFICATION

Name of Committee

Friends of Joe Dudzik

Street Address

813 W Burdick Ave

City, State and Zip Code

Mil, WI 53219

OFFICE USE ONLY

WSEB ID Number:

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 2013 Pre-Primary _____ Spring Fall Special
 July Continuing _____ 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	Audited Totals Office Use Only	
A. Contributions including Loans from Individuals	\$ -	\$ 1245.00	\$	\$
B. Contributions from Committees (Transfers-In)	\$ -	\$ 591.00	\$	\$
C. Other Income and Commercial Loans	\$ -	\$ -	\$	\$
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ -	\$ 1836.00	\$	\$

2. DISBURSEMENTS

A. Gross Expenditures	\$ 15015.00	\$ 28903.64	\$	\$
B. Contributions to Committees (Transfers-Out)	\$ -	\$ -	\$	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 15,015.00	\$ 28,903.64	\$	\$

CASH SUMMARY

Cash Balance Beginning of Report	\$ 15487.73	\$
Total Receipts	\$ -	\$
Subtotal	\$ 15487.73	\$
Total Disbursements	\$ 15015.00	\$
CASH BALANCE END OF REPORT	\$ 472.73	\$
INCURRED OBLIGATIONS (Balance at the Close of This Period)	\$ -	\$
LOANS (Balance at the Close of This Period)	\$ -	\$

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:
Lynn Dudzik	Lynn Dudzik	1-28-13
		Daytime Phone: 382-3510

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 2-A

**DISBURSEMENTS
Gross Expenditures**

Complete Committee Name
Friends of Joe Dudzik

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	Office Use
7/11/12	Joe Dudzik 8113 W Burdick Av Mil. WI 53219 Check if: <input type="checkbox"/> In-Kind Offset	Loan Pay-back	15,000.00	
8/1/12 Thru 12/31/12	PNC Bank - Service charges 7801 W Oklahoma Ave Mil. WI 53219 Check if: <input type="checkbox"/> In-Kind Offset	Service charges	15.00	
/ /	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	Office Use
/ /	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	Office Use
/ /	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	Office Use
/ /	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	Office Use
/ /	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	Office Use
/ /	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	Office Use
/ /	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	Office Use

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 15,015.00	
TOTAL ITEMIZED EXPENDITURES	\$ -	
TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS	\$ -	
TOTAL EXPENDITURES	\$ 15,015.00	

SCHEDULE 3-B

ADDITIONAL DISCLOSURE
Loans
Individual, Committee or Commercial

Complete Committee Name
Friends of Joe Dudzik

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
7/11/12	Joe Dudzik 8113 W Burdick Av Mil, WI 53219	15,000.00		15,000.00	- 0 -

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 \$ 15,000.00

TOTAL OUTSTANDING LOANS \$ 15,000.00