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.

OFFICE USE ONLY

COMMITTEE IDENTIFICATION

Name of Committee: MICHEL FOR MILWAUKEE

Street Address: 4454 S. GRIFFIN AVE.

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 2017 ☐ Pre-Primary _____ ☒ Spring ☐ Fall ☐ Special

☐ July Continuing _____

☐ September Continuing _____ ☐ Pre-Election _____

☐ 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	$ 1650.00	$ 1650.00
1B. Contributions from Committees (Transfers-In)	$ Ø	$ Ø
1C. Other Income and Commercial Loans	$ Ø	$ Ø
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	$ 1650.00	$ 1650.00
2. DISBURSEMENTS		
2A. Gross Expenditures	$ 153.50	$ 153.50
2B. Contributions to Committees (Transfers-Out)	$ Ø	$ Ø
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	$ 153.50	$ 153.50

CASH SUMMARY

Cash Balance Beginning of Report	$ Ø
Total Receipts	$ 1650.00
Subtotal	$ 1650.00
Total Disbursements	$ 153.50
CASH BALANCE END OF REPORT	$ 1496.50
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	$ Ø
LOANS (Balance at the Close of This Period-3B)	$ 100

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: Erin Messerschmidt

Signature of Candidate or Treasurer: [signature] Date: 01-16-17

Email MICHEL4MKE.TREASURER@GMAIL.COM Daytime Phone: 262-617-5012

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
MICHER FOR MILWAUKEE

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
12/1/16	BRIAN MICHER 4454 S. GRIFFIN AVE. MILWAUKEE, WI 53207 Check if: ☐ In-Kind ☒ Loan ☐ Conduit – Ethics ID#		100.00	100.00
12/3/16	PETER KONEARNY 3417 N. NEWHALL ST. MILWAUKEE, WI 53211 Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#		150.00	150.00
12/6/16	JUSTIN FEFER 2554 YENWOOD AVE. S ST. LOUIS PARK, MN 55416 Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#		25.00	25.00
12/7/16	DAVID MICHER 1031A N. 8TH ST. SHEBOYGAN, WI 53081 Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#		50.00	50.00
12/8/16	JOAN DUPREE 1209 E. KANE ST. MILWAUKEE, WI 53202 Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#		50.00	50.00
12/9/16	KEVIN PFEIFFER 226 BAY ST. APT 2 JERSEY CITY, NJ 07302 Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	ATTORNEY WALSH CONSTRUCTION 201 ROUTE 17 NORTH SUITE 607 RUTHERFORD, NJ 07070	500.00	500.00
12/9/16	JESSICA CARLSON 1345 16TH AVE. #2 GRAFTON, WI 53024 Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#		100.00	100.00

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	$ 975.00	975.00
TOTAL ITEMIZED CONTRIBUTIONS	$	
TOTAL ANONYMOUS CONTRIBUTIONS $10 OR LESS	$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	$	

SCHEDULE 1-A

RECEIPTS
Contributions (Including Loans) From Individuals

Complete Committee Name: MICHEL FOR MILWAUKEE

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
12/10/16	PAUL BROWDWIN 2208 BEVERLY RD. SHOREWOOD, WI 53211 Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#		25.00	25.00
12/16/16	KERRY HILLAND 408 N. MAIN ST. LAKE MILLS, WI 53551 Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#		100.00	100.00
12/16/16	MARY KINGMA 803 WOODLAND AVE. PORT WASHINGTON, WI 53074 Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#		100.00	100.00
12/18/16	JIM MICHEL 4107 HIGHLAND DR. PORT WASHINGTON, WI 53074 Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	CARPENTER SELF-EMPLOYED	250.00	250.00
12/21/16	GINI KLINGMAN 419 WILLOW TERRACE FOX POINT, WI 53217 Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#		25.00	25.00
12/26/16	MICHAEL ROBALL P.O. BOX 1822 FRISCO, CO 80443 Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#		50.00	50.00
12/29/16	NICOLE JONES 1812 E. LAFAYETTE PL. #304 MILWAUKEE, WI 53202 Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#		25.00	25.00

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	$ 575.00	575.00
TOTAL ITEMIZED CONTRIBUTIONS	$	
TOTAL ANONYMOUS CONTRIBUTIONS $10 OR LESS	$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	$	

SCHEDULE 1-A

RECEIPTS
Contributions (Including Loans) From Individuals

Complete Committee Name: MICHEL FOR MILWAUKEE

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
12/29/16	KATHLEEN MICHEL 1931 FIESTA LN. MEQUON, WI 53092 Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#		100.00	100.00
	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#			
	Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	$ 100.00	100.00
TOTAL ITEMIZED CONTRIBUTIONS	$ 1650.00	1650.00
TOTAL ANONYMOUS CONTRIBUTIONS $10 OR LESS	$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	$ 1650.00	1650.00

SCHEDULE 1-B

RECEIPTS
Contributions from Committees
(Transfers-In)

Complete Committee Name

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

Date	Full Name of Committee, Mailing Address and Zip Code	Amount of Contribution
	Check if: ☐ In-Kind ☐ Loan	
	Check if: ☐ In-Kind ☐ Loan	
	Check if: ☐ In-Kind ☐ Loan	
	Check if: ☐ In-Kind ☐ Loan	
	Check if: ☐ In-Kind ☐ Loan	
	Check if: ☐ In-Kind ☐ Loan	
	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	$
	TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES	$

SCHEDULE 1-C

RECEIPTS
Other Income and Commercial Loans

Complete Committee Name

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

Date	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount

SUBTOTAL OTHER INCOME THIS PAGE	$
TOTAL ITEMIZED OTHER INCOME	$
TOTAL OTHER INCOME	$

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name
MICHEL FOR MILWAUKEE

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
12/14/16	DEMOCRACY ENGINE 2125 14TH ST NW WASHINGTON, DC 20009 Check if: ☐ In-Kind Offset	DONATION CONDUIT FEES	29.30
12/21/16	DEMOCRACY ENGINE 2125 14TH ST NW WASHINGTON, DC 20009 Check if: ☐ In-Kind Offset	DONATION CONDUIT FEES	7.90
12/28/16	DEMOCRACY ENGINE 2125 14TH ST NW WASHINGTON, DC 20009 Check if: ☐ In-Kind Offset	DONATION CONDUIT FEES	10.70
12/29/16	UNION COPY CENTER 3060 S. 43RD ST. MILWAUKEE, WI 53219 Check if: ☐ In-Kind Offset	BUSINESS CARD PRINT COSTS	$ 105.60
	Check if: ☐ In-Kind Offset		
	Check if: ☐ In-Kind Offset		
	Check if: ☐ In-Kind Offset		
	Check if: ☐ In-Kind Offset		

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	$ 153.50
TOTAL ITEMIZED EXPENDITURES	$ 153.50
TOTAL UNITEMIZED EXPENDITURES	$ 0
TOTAL EXPENDITURES	$ 153.50

SCHEDULE 2-B

DISBURSEMENTS
Contributions To Committees (Transfers-Out)

Page _____ of _____

Complete Committee Name

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

Date	Full Name, Mailing Address and Zip Code	Amount	Y-T-D Total
	Check if: ☐ In-Kind ☐ Loan		
	Check if: ☐ In-Kind ☐ Loan		
	Check if: ☐ In-Kind ☐ Loan		
	Check if: ☐ In-Kind ☐ Loan		
	Check if: ☐ In-Kind ☐ Loan		
	Check if: ☐ In-Kind ☐ Loan		
	Check if: ☐ In-Kind ☐ Loan		
	Check if: ☐ In-Kind ☐ Loan		
	Check if: ☐ In-Kind ☐ Loan		
	Check if: ☐ In-Kind ☐ Loan		
	SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE	$	
	TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES	$	

SCHEDULE 3-A

Incurred Obligations Excluding Loans
ADDITIONAL DISCLOSURE

Complete Committee Name

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)			
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

Loans
Individual, Committee or Commercial
ADDITIONAL DISCLOSURE

Complete Committee Name: MICHEL FOR MILWAUKEE

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
12/1/16	BRIAN MICHEL 4454 S. GRIFFIN AVE. MILWAUKEE, WI 53207	0	100.00	0	100.00

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	$ 100.00
TOTAL OUTSTANDING LOANS	$ 100.00