CAMPAIGN FINANCE REPORT LOCAL COMMITTEES OF WISCONSIN					
Is This Report an Amendment:					
Instructions for completing schedules are on the back	of each schedule.				
COMMITTEE IDENTIFICATION Name of Committee		MAR	2 5 2022		
FAIENDS OF GABE NUDO Street Address 6410 - 53 AVE		REG	SIGNATION OF THE SENSOR OF THE		
City, State and Zip Code KENOSHA WI 53142					
Please check if address is different than previously reported, and	complete the Campaign Reg	istration Statement in the b	oack of this form.		
NAME OF REPORT					
☐ January Continuing ☐ Pre-Primary ☐ July Continuing ☐ Pre-Election ☐ Pre-Electi	Spring F	all Special	Termination Report also complete Schedule 4		
SUMMARY OF RECEIPTS AND DISBURSEMENTS	Column A This Period	Column B Calendar			
1. RECEIPTS		Year-To-Date			
1 A. Contributions (Including Loans) from Individuals	\$ 0	\$ 0			
IB. Contributions from Committees (Transfers-In)	\$ 0	\$ 0			
IC. Other Income and Commercial Loans	\$ 0	\$ -	-		
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 0	\$ -			
2. DISBURSEMENTS					
2A. Gross Expenditures	\$ 1026.67	\$ 1026.67 \$ 880.00 \$ 1826.67			
2B. Contributions to Committees (Transfers-Out)	\$ 800.00	\$ 880,00			
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 1826.67	\$ 1826.67			
CASH SUMMARY	r				
Cash Balance Beginning of Report	\$ 16484.92	i			
Total Receipts	\$ -6				
Subtotal	\$ 16484. 92				
Total Disbursements	Total Disbursements \$ 1826.67				
CASH BALANCE END OF REPORT	\$ 14658, 25				
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A) \$					
LOANS (Balance at the Close of This Period-3B) \$ 100,00					
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: 3/24/22					
James Tirabassi, Treas Em	ail TTERABASSIE	TECCHA, Co Baytime 1	Phone:		

NOTE: The information on this form is required by ss. 11.0204, 11.0304, 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

Page	of
1 ago	 01

Complete Committee Name				
6 m. c. 1 h p	0	CART	*/// N.A	
FKIENDS	1) !	6 H 13 E	NUDO	
FRIENDS	0 1-	BABC	N U D U	

Instructions for	completing schedules are on the back of each sch	nedule.		
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
		-		
		, , , , , , , , , , , , , , , , , , ,		
	Check if: In-Kind Loan Conduit – Ethics ID#			
		2		
		4		
	1			
	Check if: In-Kind Loan Conduit – Ethics ID#			
		/		
		/		
	Check if: In-Kind Loan Conduit - Ethics ID#			
	/			
	1			
	/			
	Check if: In-Kind Loan Conduit - Ethics ID#			
		8 8 8		
		t. I.		
	Check if: In-Kind Conduit - Ethics ID#			
		•		
	,			
	Check if: In-Kind Loan Conduit – Ethics ID#			
	CHECK II. [1] III-KIIId [1] EGAII GGIIdak Ealios IDI			
	Check if: In-Kind Conduit – Ethics ID#			
	Check II. ETH-MIND ELCOROLIC - ETHICS ID#			
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE			\$	
			¢	
TOTAL ITEMIZED CONTRIBUTIONS			\$	
	TOTAL ANON	NYMOUS CONTRIBUTIONS \$10 OR LESS	\$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS			\$	

SCHEDULE 2-A

DISBURSEMENTS Gross Expenditures

Complete Committee Name

FRIENDS OF GABE NUDO

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

	completing schedules are on the back of each schedule.	Specific Burness of Evpanditure	Amount
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
1/21	KENOSHA NEWS 6535 - Green Bay R1 Kenoshe W1 53147 Check if: [In-Kind Offset	ADVERTISING	162. us
1/22	WETER PRINTING 3048 N 34 ST MILWAUKEE WI 53141 Check if: In-Kind Offset	POST CARDS FOR SAM	51,70
1/27	45P\$ 5605-5herriston Rol Kearosher W1 53140 Check if: 1 In-Kind Offset	STAMPS FOR SAN'S CARDS	40.40
2/7	OFFICE MAX 6816-Green Boy Rel Kenoslie WI 53142 Check it: 1 In-Kind Offset	BLACK INK &	108,65
2/11	OFFICE MAX 6816-6-zeen Bay R91 6816-6-zeen Bay R91 Check if: In-Kind Offset	COLOR INK	64.34
426	RPKC POBOX 853 KMOSha WI 53141 Check If: In-Kind Offset	Membership	220.00
3/17	WEBER PRINTING 3048 N 34 ST MILWAUKEE WI 53210 Check if: M In-Kind Offset	BROCHURES	279.58
3/21	USPS 5005 - Shevidan Rd Keyesha W1 5314 D Check if: Nn-Kind Offset	STAMPS FOR SAH'S CARDS	100.00
		STOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 1026,67
		TOTAL ITEMIZED EXPENDITURES	\$

TOTAL UNITEMIZED EXPENDITURES

TOTAL EXPENDITURES \$ 1026.67

SCHEDULE 2-B

DISBURSEMENTS Contributions To Committees (Transfers-Out)

Page ______ of _____

Complete Committee Name				
FRIENDS	OF	GABE	NUDO	

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

Date	Full Name, Mailing Address and Zip Code	Amount	Y-T-D Total
711	BRIAN BASHAW	200,00	
3/11		2001	200,00
/			
	Check if: In-Kind Loan FRIENDS OF SAM KERKHAN		
71	FRIENDS OF SAM REKKAAR	2.50,00	250,00
3/13			250,00
/	0. 1.7. [] 1. 1/2.1		
	Check if: In-Kind Loan CitizEN FOR JOHN POOLE		
3/16	CITIZEN FOR JOHN POOLE	100,00	100.00
2/16		100,00	1601
	Check if: In-Kind i Loan		
3/13	Zack Rodriguez	250,00	250,00
11.7	•	2001	
	Check if: In-Kind Loan		
	Check if: In-Kind Loan		
	Check if: ☐ In-Kind ☑ Loan		
	Check if: In-Kind Loan		
	Check II. III-Killu Loaii		
	61		
	Check if: 🗍 In-Kind 🗓 Loan		
	Check if: In-Kind I Loan		
			200
	SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE	\$ 850,00	800,00
		000 00	800,00
	TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES	\$ 000.00	0 50,00



Complete Committee Name

Loans Individual, Committee or Commercial ADDITIONAL DISCLOSURE

Page ____of ___

FRI	ENDS OF GABE N	UDO				
Instructions fo	r completing schedules are on the back of each se					
	Full Name, Mailing Address and Zip Code of Loan Source		Outstanding Obligations Beginning of This	New Loans This	Cumulative Payments This Period	Outstanding Obligations End of This Period
Date	6410 - 53 AVR		Period	Period		100 00
	6ABE NUDO 6410 - 53 AVR KENOSHA WI 53	142	100.00	Ð	-0	100.00
List All Endorse	rs or Guarantors (if any)					
Full Name, Mail of Guarantor	ing Address and Zip Code	Occupation				
		Amount Guarantee	ed Outstanding			
		\$				
Full Name, Mail of Guarantor	ling Address and Zip Code	Occupation				
or Gadrantor		Amount Guarantee	ed Outstanding			
		\$				
	Full Name, Mailing Address and Zip Code of Loan Sou	rce	Outstanding Obligations Beginning of This	New Loans This	Cumulative Payments This Period	Outstanding Obligations End of This Period
Date			Period	Period		
1 1						
List All Endorse	rs or Guarantors (if any)					
Full Name, Mai	ling Address and Zip Code	Occupation				
o. Gadrano		Amount Guarantee	ed Outstanding		is .	
		\$				
Full Name, Mai	ling Address and Zip Code	Occupation				
		Amount Guarantee	ed Outstanding			
		\$				
	Full Name, Mailing Address and Zip Code of Loan Sou	ırce	Outstanding		Cumulative	Outstanding
			Obligations Beginning of This	New Loans This	Payments This Period	Obligations End of This Period
Date			Period	Period		
1 1						
List All Endorse	ers or Guarantors (if any)					
	ling Address and Zip Code	Occupation				
of Guarantor		Amount Guarante	ed Outstanding			
		\$				
Full Name, Mailing Address and Zip Code of Guarantor		Occupation				
		Amount Guarante	ed Outstanding			
		\$				
			SUBTOTAL O	UTSTANDING LOA	ANS THIS PAGE	\$
				TOTAL OUTSTA	ANDING LOANS	\$ 100.00