

**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 GABE NUDO

Street Address
6410 - 53 AVE

City, State and Zip Code
KENOSHA WI 53142

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 Termination Report
 July Continuing Pre-Election also complete Schedule 4
 September Continuing Pre-Election

SUMMARY OF RECEIPTS AND DISBURSEMENTS

	Column A This Period	Column B Calendar Year-To-Date
1. RECEIPTS		
1A. Contributions (Including Loans) from Individuals	\$ 0	\$ 0
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)	\$ 0	\$ 0
2. DISBURSEMENTS		
2A. Gross Expenditures	\$ 1026.67	\$ 1026.67
2B. Contributions to Committees (Transfers-Out)	\$ 800.00	\$ 800.00
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 1826.67	\$ 1826.67

CASH SUMMARY

Cash Balance Beginning of Report	\$ 16484.92
Total Receipts	\$ 0
Subtotal	\$ 16484.92
Total Disbursements	\$ 1826.67
CASH BALANCE END OF REPORT	\$ 14658.25
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ 0
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 Jamas Tirabassi, Treas	Signature of Candidate or Treasurer <i>Jamas Tirabassi</i>	Date: 3/24/22
	Email: JTIRABASSI@TFCCPA.COM	Daytime Phone:

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
FRIENDS OF GABE NUDO

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
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			

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

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name
FRIENDS OF GABE NUDDO

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
1/21	KENOSHA NEWS 6535 - Green Bay Rd Kenosha WI 53142 Check if: <input type="checkbox"/> In-Kind Offset	ADVERTISING	162.00
1/22	WEBER PRINTING 3048 N 34 ST MILWAUKEE WI 53141 Check if: <input checked="" type="checkbox"/> In-Kind Offset	POSTCARDS FOR SAM	51.70
1/27	USPS 5605 - Sheridan Rd Kenosha WI 53140 Check if: <input checked="" type="checkbox"/> In-Kind Offset	STAMPS FOR SAM'S CARDS	40.40
2/7	OFFICE MAX 6816 - Green Bay Rd Kenosha WI 53142 Check if: <input type="checkbox"/> In-Kind Offset	BLACK INK & PAPER	108.65
2/11	OFFICE MAX 6816 - Green Bay Rd Kenosha WI 53142 Check if: <input type="checkbox"/> In-Kind Offset	COLOR INK	64.34
2/26	RPKC PO BOX 853 Kenosha WI 53141 Check if: <input type="checkbox"/> In-Kind Offset	Membership	220.00
3/17	WEBER PRINTING 3048 N 34 ST MILWAUKEE WI 53210 Check if: <input checked="" type="checkbox"/> In-Kind Offset	BROCHURES	279.58
3/31	USPS 5605 - Sheridan Rd Kenosha WI 53142 Check if: <input checked="" type="checkbox"/> In-Kind Offset	STAMPS FOR SAM'S CARDS	100.00

SUBTOTAL 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)

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
3/11	BRIAN BASHAW Check if: <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Loan	200.00	200.00
3/13	FRIENDS OF SAM KERKMAN Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	250.00	250.00
3/16	CITIZEN FOR JOHN POOLE Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	100.00	100.00
3/13	Zack Rodriguez Check if: <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Loan	250.00	250.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE		\$ 800.00	800.00
TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES		\$ 800.00	800.00

SCHEDULE 3-B

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

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 of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
1 / 1	<u>GABE NUDO 6410 - 53 AVE KENOSHA WI 53142</u>	<u>100.00</u>	<u>0</u>	<u>0</u>	<u>100.00</u>

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	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 \$
Full Name, Mailing Address and Zip Code of Guarantor	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 \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

SUBTOTAL OUTSTANDING LOANS THIS PAGE

\$

TOTAL OUTSTANDING LOANS

\$ 100.00