Δ					
CAMPAIGN FINANCE REPORT LOCAL COMMITTEES OF WISCONSIN					
	_	S OF WISCO	121	" ME	EVEN
Is This Report an Amendment: Yes	No			K	
Instructions for completing schedules are on the back	of each	schedule.		AU	G - 1 2022
COMMITTEE IDENTIFICATION					
SIMMONS FOR OFFICE				REG	BI WALIGORA UNTY CLERK
Street Address					FFICE USE ONLY
City, State and Zip Code					
KENGHA, WI. 53143	>				
Please check if address is different than previously reported, and	complete	the Campaign Reg	istra	tion Statement in the	back of this form.
NAME OF REPORT					
January Continuing Pre-Primary					
July Continuing		Spring I	all	☐ Special	☐ Termination Report
September Continuing Pre-Election					also complete Schedule 4
SUMMARY OF RECEIPTS AND		Column A		Caluma D	T
DISBURSEMENTS		his Period		Column B Calendar	
1. RECEIPTS				Year-To-Date	
1A. Contributions (Including Loans) from Individuals	\$	820	\$	820	
1B. Contributions from Commíttees (Transfers-In)	\$	0	\$	0	
1C. Other Income and Commercial Loans	\$	0	\$	0	
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$	820	\$	820	
2. DISBURSEMENTS					1
A. G. R. W.	\$	٥	\$	0	1
2A. Gross Expenditures			<u> </u>		-
2B. Contributions to Committees (Transfers-Out)	\$	0	\$	0	-
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$	0	\$	0	
CASH SUMMARY					
Cash Balance Beginning of Report	\$ 12	65.40			
Total Receipts	\$ 8	320			
Subtotal	\$ 20	85.60			
Total Disbursements	\$	0			
CASH BALANCE END OF REPORT	\$ 3	1085.60			
INCURRED OBLIGATIONS (Polymer 4th Class of This Project 2A)	œ.	,			
(Balance at the Close of This Period-3A)	\$	20101 11.			
LOANS (Balance at the Close of This Period-3B)		399,14	4		
I cortify that I have examined this report and to the hest of m	v knowle	dae and helief it is	. 1000	a correct and come	loto

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 of Treasurer	Date:
20 101 0	Mrs. Will Som	1131132
Mrs. Wilno Simmons	Email Smmasju 2 vahai, Cen	Daytime Phone (847) 239 -4273
11.10		

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

Page ____ of ____

Complete Committee Name

STAM MONS FOR OFFICE

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

Occupation (if)

	or completing schedules are on the back of each sc			
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
(e/18/9)	Henry Frack 915 Indiana St. Racine WI 53405 Check if: 0 In-Kind 0 Loan 0 Conduit - Ethics ID#	LWP	\$20	\$20
7/25/22	Susan + Tim 4ng 5th Ave Kenshe Wi Check if: [In-Kind [Loan] Conduit - Ethics ID#	Detired	005\$	\$580
7/35/02	Penny Schauber 7616 32-2 Me. Kerusha W.53142 Check if: [In-Kind [Loan] Conduit - Ethics ID#	Defred	\$ 50	50
7/25/22	Anne Ktol 9914 Lakeshove DK. Pleasint Piri. Check It. In-Kind Loan Conduit - Ethics ID#	Petirio	\$ 100	160
7/25/20	Gabriel Conroe 2893 Summit Aux, Highland Park Check It. @In-Kind @Loan@Conduit-Ethics ID#	Lake Comby	\$ 120	120
7/17/22	Fravis Beckius 4017 241st Ct. Salem, Wissito Check if: @In-Kind @Loan@Conduit-Ethics ID#		\$10	\$10
7/11/22	Pamela Bishop 3811 15th St. Kensh, W. 53144 Check if: [In-Kind [Loan] Conduit - Ethics ID#		\$ 15	\$15
	CLIDTOTAL	TEMIZED CONTRIBUITIONS THE BACE	\$ 815	815
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE TOTAL ITEMIZED CONTRIBUTIONS				313
		\$		
		YMOUS CONTRIBUTIONS \$10 OR LESS	\$	
	TOTAL CONTRIBU	JTIONS RECEIVED FROM INDIVIDUALS	\$	

SCHEDULE 1-A

RECEIPTS Contributions (Including Loans) From Individuals

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Complete Com	NONS POKOGETOF			
	r completing schedules are on the back of each sc	hedule.		
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
71.01	Tyshuana Pompey			
18/	Tyshuona Pompy 1448 16th Are #204 Kerushey, Wi 5346 Check if: @In-Kind @Loan@Conduit-Ethics ID#		\$ 5	\$10
/22	Komalowa W: 531HA			
	Check if: In-Kind Loan Conduit - Ethics ID#			
	Check if:			
	Office II. [4] III-Mild [6] Eden [6] Official Control			
	Check if: In-Kind Loan Conduit - Ethics ID#			
	Check if: In-Kind Loan Conduit – Ethics ID#			
		• • •		
	Check if: In-Kind Loan Condult - Ethics ID#			
		6 6 6		
	Check if: In-Kind Loan Conduit - Ethics ID#			
	Check if:			
			- F	1 20
	SUBTOTAL	ITEMIZED CONTRIBUTIONS THIS PAGE	s 5	930
		TOTAL ITEMIZED CONTRIBUTIONS	: 870	800
		IYMOUS CONTRIBUTIONS \$10 OR LESS	\$	830
	TOTAL CONTRIB	SUTIONS RECEIVED FROM INDIVIDUALS	\$ 820	A320

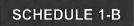
SCHEDULE 2-A

DISBURSEMENTS Gross Expenditures

Page ___ of ___

Complete Committee Name	
Stmwons For Other	
Instructions for completing schedules are on the back of each schedule.	

Instructions for	completing schedules are on the back of each schedule.	P. P. Candinius	Amount
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	
	Of Person or Business to Them? ay.		
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	Check it: In-Kind Offset		
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		TOTAL UNITEMIZED EXPENDITURES	s ()
		(W) Fig. 4(1)	
		TOTAL EXPENDITURES	s ()



RECEIPTS Contributions from Committees (Transfers-In)

Page	of

Complete Committee Name		7	
SIMMONS	FOR.	SIFFO	

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

Date	Full Name of Committee, Mailing Address and Zip Code	Amount of Contribution
	-NA-	
	Check if:	
	Check if:	-
	Check if:	
	Check if:	
	Check if:	
	Check if:	
	CHECK II. IT I I FKING II LOZII	
	Check if:	
	Check if: ☐ In-Kind ☐ Loan	
	Check II: L In-Kind L Loan	
	Check if:	
	SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE	\$
	SSETS THE SOUTHERN THE TRANSPORT THE PAGE	
	TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES	\$

SCHEDULE 1-C

RECEIPTS Other Income and Commercial Loans

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Page	of

Complete Con	MMONS FOR OFFICE		
Instructions f	or completing schedules are on the back of each sched	dule.	
Date	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
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		-	
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	Ü		0
		SUBTOTAL OTHER INCOME THIS PAGE	\$
		TOTAL ITEMIZED OTHER INCOME	s ()
		TOTAL OTHER INCOME	



RECEIPTS Other Income and Commercial Loans

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Instructions for	or completing schedules are on the back of each sched	dule.	
Date	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
	of Source of Income		
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		SOBJOINE OTHER MODRIE HIROTAGE	
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		TOTAL ITEMIZED OTHER INCOME	\$
			n
		TOTAL OTHER INCOME	5



Loans Individual, Committee or Commercial ADDITIONAL DISCLOSURE

Page	of
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TOTAL OUTSTANDING LOANS \$

Complete Committe	Name Name Name Now Stock Off Tok						
Instructions for co	ampleting schedules are on the back of each so	chedule					
Date	tions for completing schedules are on the back of each schedule. Full Name, Mailing Address and Zip Code of Loan Source te		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 A of Guarantor	Address and Zip Code	Occupation					
		Amount Guarantee	ed Outstanding				
Full Name, Mailing A of Guarantor	f Guarantor		Occupation				
			Amount Guaranteed Outstanding \$				
Fu	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 A of Guarantor	Address and Zip Code	Occupation					
		Amount Guaranteed Outstanding \$					
Full Name, Mailing A of Guarantor	Address and Zip Code	Occupation					
		Amount Guaranteed Outstanding \$					
Fu	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)		<u> </u>			1	
Full Name, Mailing A	Address and Zip Code	Occupation			1		
		Amount Guaranteed Outstanding \$					
Full Name, Mailing A	Address and Zip Code	Occupation					
		Amount Guaranteed Outstanding \$					
		1	SUBTOTAL O	UTSTANDING LOA	NS THIS PAGE	s ()	