	N FINANCE REPORT MITTEES OF WISCO				
Is This Report an Amendment: Yes No					
Instructions for completing schedules are on the ba	ick of each schedule.	le U			
COMMITTEE IDENTIFICATION		K			
Name of Committee FACH ROPULTUR FOR KENOSHA Street Address OFFICE USE ONLY					
Po Box 191 City, State and Zip Code		CO	GI WALIGORA UNTY CLERK		
KENOSHA, WI, 53/4/1					
Please check if address is different than previously reported, a	nd complete the Campaign Reg	istration Statement in the b	ack of this form.		
NAME OF REPORT					
January Continuing Pre-Primary July Continuing September Continuing Pre-Election	Spring I	Fall Special	☐ Termination Report also complete Schedule 4		
SUMMARY OF RECEIPTS AND	Column A	Column B			
DISBURSEMENTS	This Period	Calendar			
1. RECEIPTS		Year-To-Date			
1A. Contributions (Including Loans) from Individuals	\$ 57.73	\$ 4,052.15			
1B. Contributions from Committees (Transfers-In)	\$	\$ 500			
1C. Other Income and Commercial Loans	\$	\$ &	1		
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 52.23	\$ 4,557.15			
2. DISBURSEMENTS		4.			
2A. Gross Expenditures	\$ 1,582,82	\$ 3,778.72			
2B. Contributions to Committees (Transfers-Out)	\$	\$	-		
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 1,582.82	\$ 3,778.22			
CASH SUMMARY					
Cash Balance Beginning of Report	\$ 2,834.57				
Total Receipts	\$ 57.73				
Subtotal	\$ 7,886.75				
Total Disbursements	\$ 1,582.82				
CASH BALANCE END OF REPORT	\$ 1,303,93				
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$	141			
LOANS (Balance at the Close of This Period-3B)	\$				
I certify that I have examined this report and to the best o	f my knowledge and belief it	is true, correct and compl	ete.		
Type or Print Name of Candidate or Treasurer	Signature of Candidate or Treasurer	Date: 9	-26 - 7072		
FACH RODRIGUE	Email ZACHE RODAILE	17 For Daytime	-26 - 707 2 Phone: 762 9/4 6178		

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.

SCHEDUI	F 1-A	RECEIPTS	and the same of th	age 1 of 7
	Contributions (inclu	ding Loans) From Individuals	PECE	IV
Complete Comm	nittee Name COOLIGUT FOR 1600051/14		1.4	
	r completing schedules are on the back of each sch Full Name, Mailing Address and Zip Code Of Contributor	nedule. Occupation (if year-to-date total exceeds \$200)	SEP 2 Amount of Contribution	7 2022 Y-T-D Total
Q	CHUISS PETIL		REGI WAL	GORA
8 75	9511 8157 57 # 20		S Z , Z S	52.23
25	95/1 8/57 57 # 28 PC 67/5/17 53 Check if:	99		
	Gridok II. I I I Kana I Zedan Goridan Zanes Izin			
				1
	Check if: In-Kind Loan Conduit – Ethics ID#		,	/
			-/	
	Check if: In-Kind Loan Conduit – Ethics ID#	/		
	Once in Carrier I and Carrier			
		/ /		
		J.		
	Check if: In-Kind Loan Conduit – Ethics ID#			
	Check if: In-Kind Loan Conduit Ethics ID#			
	Check if: In-Kind Loan Conduit - Ethics ID#			
				34
	Check if: In-Kind Loan Conduit - Ethics ID#			
			(2 22	

subtotal itemized contributions this page \$ \$2.73

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS \$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS \$ 57.73

\$ \$ 57.73

SCHEDULE 1-B

RECEIPTS

Contributions from Committees (Transfers-In)

SEP 2 7 2022

REGIWALIGORA
COUNTY CLERK

Complete Committee Name
ZACH RODALING FOR KENOSHIP

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:	
	/	
	Check if:	
	Check if: In-Kind Loan	
	<i>f</i>	
	Check if:	
	<i>f</i> •	
	/	
	Check if:	
	<i>f</i>	
	Check if:	
	<i>f</i> :	i i
	Check if:	
1	Check if:	
1		
6		
;		
	Check if:	
	SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE	\$
	TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES	\$

SCHEDULE 1-C

RECEIPTS Other Income and Commercial Loans

PA.	Cis Fue Stee	G	Page 3	of	2
W. Water	S	EP	2 7 20	22	

Complete Committee Name 16020SHIA FACH RODKIGUEZ FOR Instructions for completing schedules are on the back of each schedule. Full Name, Mailing Address and Zip Code of Source of Income Type of Income Amount REGI WALIGORA COUNTY CLERK SUBTOTAL OTHER INCOME THIS PAGE TOTAL ITEMIZED OTHER INCOME \$

TOTAL OTHER INCOME \$



Complete Committee Name

DISBURSEMENTS

Gross Expenditures FACE RODRIGUES FOR

KCNOSINA

SEP 2 7 2022

Instructions for completing schedules are on the back of each schedule REGIWALIGORA COUNTY CAPANT Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Of Person or Business to Whom Payment is Made EVENT EXPONSES KENOSHA BREWING \$30.25 4017 804 57 KONDSHA, WI, 53143 Check if: In-Kind Offset DINNER AT EVENT RUFFOLOS SPECIAL PIZZAII \$ 24 52 3931 45th ST Check if: In-Kind Offset 119 FUNDRAISER TUIN CAKES PO \$110 970 LANCE DR 04 TWIN CHKES, WI JC PENNY CAMPAIGN 10225 77mst 53158 \$120.50 CLOTRING 18 PLEASANT PRAIRIE WI Check if: In-Kind Offset GOOGE DOMAINS 8-830 1600 AMPHITHEATHE PREY EMAIL 19 MOUNTAIN VIEW, CA Check if: 🗓 In-Kind Offset 94043 8 22 CROSS + OBENLIE SIGNIS \$ 1189.36 916 BYRD AVE NEENAH, WI, 54956 Check if: In-Kind Offset CAMPAIGN CLOTHING MIDNEST EMB. \$ 75.60 3211 WHISHINGTON AVE RACINE, WI, 53405 Check if: In-Kind Offset 8_31 BANIC FEES STRIPE 185 BEAUT ST STE 550 \$ 7.59 SAN FRANCISCO, CA Check if: In-Kind Offset 94/07 s 1,582.82 SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE s 1,587.87 TOTAL ITEMIZED EXPENDITURES

TOTAL UNITEMIZED EXPENDITURES

TOTAL EXPENDITURES

\$1,587.82

SCHEDULE 2-B

DISBURSEMENTS Contributions To Committees

(Transfers-Out)

Complete Com	mittee Name		
FACH	ROOMINUZ	For	KENDSHIA

REGI WALIGORA COUNTY CLERK

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

Date	Full Name, Mailing Address and Zip Code	Amount	Y-T-D Total
			1
		/	
	Check if:		
	Check II. [4] III-Killa [4] Edali		
	Check if:		
~	Check if:		
	Check if: In-Kind Loan		Α.
	Check if:		
	Check if: In-Kind Loan		
đe.	Check if:		
	Oneokii. [4] myana [4] Edan		
	Check if:		
J.		01	
K	Check if: In-Kind Loan		
	SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE	\$	
		1.0	
	TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES	\$	

SCHEDULE 3-A

Incurred Obligations Excluding Loans ADDITIONAL DISCLOSURE



Complete Committee Name			
TACH RODAL	wer for	Honosur	

Instructions	for completing schedules are on the back of each	schedule.				/
	, j.	Outstanding Balance Beginning This Period	New Obligations or Additions This Period	Cumula Th	tive Payments	Outstanding Balance At Close of This Period
Date	Full Name, Mailing Address and Zip Code of Creditor	Nature of Debt (Purpose)		/		
		Nature of Deot (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					
1 1		Nature of Debt (Purpose)				
Date /	Full Name, Mailing Address and Zip Code of Creditor				-	
, ,		Mature 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		-			
L		Nature of Debt (Purpose)				
		SUBTOTAL ITEMIZE	D OBLIGATIONS THIS	PAGE	\$	
		тот	AL ITEMIZED OBLIGA	ATIONS	\$	
		TOTAL UNITEMIZED	OBLIGATIONS \$20 O	R LESS	\$	
		TOTA	L INCURRED OBLIGA	ATIONS	\$	

SCHEDULE 3-B

Loans Individual, Committee or Commercial ADDITIONAL DISCLOSURE

	E Cage 7 of 7	T. Carrie
K	SEP 2 7 2022	

Complete Committee Name				CEP o	7 2000
ZACH RODALNET FOR K	enosua	- 1		SEP 2	/ 2022
Instructions for completing schedules are on the back of each so	chedule.				
Full Name, Mailing Address and Zip Code of Loan Sou	rce	Outstanding		Cumulative WAL	GOPOutstanding LERIObligations
		Obligations	New Loans This	Payments This Period	End of This Period
		Beginning of This Period	Period	This renou	End of This Feriod
Date			35		
			1		
List All Endorsers or Guarantors (if any)			_/	1.	
Full Name, Mailing Address and Zip Code of Guarantor	Occupation)	1		
	Amount Guarantee	ed Outstanding			
	\$	/			
	Ψ				
Full Name, Mailing Address and Zip Code of Guarantor	Occupation				
of Guarantor	Amount Guarantee	ad Outstanding			
		/			
	\$				
	1				
Full Name, Mailing Address and Zip Code of Loan Sou	rce	Outstanding		Cumulative	Outstanding
7 dir Name, Maining / Laress and 2.15 Godd of Edun God	/	Obligations		Payments	Obligations
	/	Beginning of This	New Loans This	This Period	End of This Period
Date	1	Period	Period		
					-
List All Endorsers or Guarantors (if any)					
Full Name, Mailing Address and Zip Code	Occupation				
of Guarantor					
/	Amount Guarantee	ed Outstanding			
<i>f</i>	\$				
<i>f</i>					
Full Name, Mailing Address and Zip Code of Guarantor	Occupation				
X	Amount Guarantee	ed Outstanding			
/		ou outclamaing			
<i>f</i>	\$				
				1 -	
Full Name, Mailing Address and Zip Code of Loan Sou	irce	Outstanding Obligations		Cumulative Payments	Outstanding Obligations
		Beginning of This	New Loans This	This Period	End of This Period
		Period	Period		
Date		4			
1 1					
List All Endorsers or Guarantors/(if any)					
Full Name, Mailing Address and Zip Code of Guarantor	Occupation				
	Amount Guarante	ed Outstanding		_	
	\$	9			
	φ				
Full Name, Mailing Address and Zip Code	Occupation				
of Guarantor					
	Amount Guarante	ed Outstanding			
	\$				
	1				
		SUPTOTAL O		ANS THIS PAGE	

SUBTOTAL OUTSTANDING LOANS THIS PAGE

5

TOTAL OUTSTANDING LOANS \$