	N FINANCE REPORT		
Is This Report an Amendment: Yes	No	DECE	IVEN
Instructions for completing schedules are on the ba	ck of each schedule.	K	
COMMITTEE IDENTIFICATION		JAN 1	8 2023
Name of Committee ROPMGUCT FOR CENOSTUB			
Street Address	-	REGI WA	EIERUSE ONLY
PO BOX 191 City, State and Zip Code			
WENDSHA, WI 53/4/			
Please check if address is different than previously reported, a	nd complete the Campaign Reg	istration Statement in the l	pack of this form.
NAME OF REPORT			
January Continuing 7073 Pre-Primary July Continuing September Continuing Pre-Election	Spring 1	Fall Special	☐ Termination Report also complete Schedule 4
SUMMARY OF RECEIPTS AND	G.1. A	C.I. D	
DISBURSEMENTS	Column A This Period	Column B Calendar	
1. RECEIPTS		Year-To-Date	
1A. Contributions (Including Loans) from Individuals	\$ 870	\$ 5747.15	
1B. Contributions from Committees (Transfers-In)	\$ 750	\$ 5,500	
1C. Other Income and Commercial Loans	\$ &	\$	
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 1,570	\$ 10,747.15	
2. DISBURSEMENTS			
2A. Gross Expenditures	\$ 4,057.82	\$ 10,457.14	
2B. Contributions to Committees (Transfers-Out)	\$ 25	\$	
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 4,051.82	\$10,451.14	
CASH SUMMARY			
Cash Balance Beginning of Report	\$ 7,857.83		
Total Receipts	\$ 1,570]	
Subtotal	\$ 4477.83		
Total Disbursements	\$ 4051.82]	
CASH BALANCE END OF REPORT	\$ 376.01	_	
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ <i>E</i>		
LOANS (Balance at the Close of This Period-3B)	\$ 8]	
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: /	1-17-2023
EAGU COMBUET	Email 40000036 (Compare	Daytime	762 Phone: 9/4-6/78

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.

RECEIPTS **Contributions (Including Loans) From Individuals**

820

Complete Committee Name

Ronnieur-KENOZHA Fon Instructions for completing schedules are on the back of each schedule.

Date Full Name, Mailing Address and Zip Code Of Contributor Occup Occupation (if year-to-date total exceeds \$200) Amount of Y-T-D Contribution Total IOM NOVEDCOH \$100 4111 TAFT RO WENDSHM, CM, 53142 MANAGER BARB GIRLEFIN \$500 7007 KIST ST KENOSHA, WI Check if: In-Kind Loan Conduit - Ethics ID# Kim SUANSON 11606 313th AVE TUIN LAKES, WI KATHLEEN BETCHENL 6603 43 MD AVE 11 \$70 ILENOSHA, WI, 53/42 Check if: In-Kind Loan Conduit - Ethics ID# CHIRIS VENZAL 11 \$50 19515 1074 57 BrisTOL, W1, 53104 Check if: ☐ In-Kind ☐ Loan Conduit – Ethics ID# AMY NORDLOH 10 4111 TAFT RO \$100 KENOSHA, WI, 53142 Check if: In-Kind Loan Conduit - Ethics ID# Check if: In-Kind Loan Conduit - Ethics ID# 870 SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE 820 TOTAL ITEMIZED CONTRIBUTIONS **TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS**

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

RECEIPTS Contributions from Committees (Transfers-In)

Page Z of U

Complete Committee Name			
ROBNIGUEZ	Fen	KENOCHA	
COLCUC		0003	

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

Date	Full Name of Committee, Mailing Address and Zip Code	Amount of Contribution
10-31	STEIL FOR WI PO BOX 620066, MIDDLETON, WI, 53567	\$ 250
-31	PO 130X 620066, MIDDLETON, WI, 53562	9
	Check if:	
10	FIRST CONCRESSIONAL DISTRICT REPUBLICAN	
-31	PANUTY OF WISCOUSIN	\$ 500
	FIRST CONCRESSIONAL DISTRICT REPUBLICAN PANTY OF WISCONSIN 1995 KNOB RD. BUNLINGTON, WI, 53/05 Check if: In-Kind I Loan	
- d.		
	S = 1	
	Check if:	
	Check if:	
	Check if:	
	Check if: ☐ In-Kind ☐ Loan	
		* 1
	Check if: ☐ In-Kind ☐ Loan	
	CHOCK II. [2] III TAIRO [2] COURT	
	_	
	Check if: ☐ In-Kind ☐ Loan	
	Official in think 12 Louis	
	н	
	Check if: ☐ In-Kind ☐ Loan	
	Oneon II. [4] IPRIII 4 LOBII	
	SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE	\$ 750 \$ 750
		7~~
	TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES	s +50

SCHEDULE 2-A

DISBURSEMENTS Gross Expenditures

Complete Committee Name
NODNIGU-7- FOR UC-NOSMA

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

Date	Full Name, Malling Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
10-78	FACE BOOK	ADS	\$75
	1 HACILLAY		
	MENO BRAIL, CA		
	Check if: 🔲 In-Kind Offset 9 4075		
10-78	6535 GAGEN BA. NO	ADS/ CTE'S	\$40
	Check if: In-Kind Offset		
10	FACE BOOK	ADS	4
-31	1 HACKEN WAY		\$110
	MENIO PAVILL, CVA Check if: 1n-Kind Offset 94075	*	
11-1	FACEBOOIC	ADS	
	1 HACKER WAY,		\$57.78
	MENCO PANIC, CA	, and a	
	Check if: 🖸 In-Kind Offset 94075		
11-2	FACEBOOK	AUS	\$75
	1 HACKER LAY	=	4 / 3
	MENTO PAUL, CA 94075 Check if: 1 In-Kind Offset		
11-2	REPOBLICAN ADS 700 PERUSYLVANIA AVE -SE	DIGITAL	\$1,000
	700 7600592040111 7150		
	L'USHIMITON, DC, 20003	1	N N
	Check if: In-Kind Offset	0.00	
11-3	1 HACKEN WAY	1702	3175
	MENTO PARIL, CA Check if: In-Kind Offset 94075	-	
11-9	FACE BOOK	ADS	\$175
((1 1144 1 1 111		D
	MENTO PANIL, CA Check if: In-Kind Offset 94025		
	I Jessif:		1

SUBTOTAL ITEMIZED EXPENDITURES \$ 1,607.78

TOTAL ITEMIZED EXPENDITURES \$ 4051.82

TOTAL UNITEMIZED EXPENDITURES \$ 4057.82

SCHEDULE 2-A

DISBURSEMENTS Gross Expenditures

Complete Committee Name			N
Roomen 7	FOR	LENOSHA	

Instructions for completing schedules are on the back of each schedule. Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount Of Person or Business to Whom Payment is Made WEBSITE/EMAIL G001766 \$6 1600 AMPHITHEATOR DRY MOUNTAIN VIEW, CA Check if: 🖂 In-Kind Offset 94043 CAMPAIGN SIDE KICK \$ 2,163.62 TEXTS 11-15 1550 OLD ANNETTA, ALGOO TK, 79008 Check if: In-Kind Offset LATISITE / EMAIL (2000-16 1600 AMPHITHEATER PKY \$6 MOUNTAIN VIEW, CA
Check if: In-Kind Offset 94043 ANDS FALE BOOK 12-1 \$47.67 1 HACIEUM WAY MENTO PANC, CA Check if: In-Kind Offset 94075 2 HILL 17-8 AVX \$ 185 6170 748t ALE SACEN, WI, 53168 PROCESSAL FEETS 835.75 STRIPE 354 OYSTON POINT BLUD -6 S. SAN FRANKISCO, CA 94080 Check if: In-Kind Offset Check if: In-Kind Offset Check if: In-Kind Offset 2,444.04 SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE 4057.82 **TOTAL ITEMIZED EXPENDITURES** TOTAL UNITEMIZED EXPENDITURES 4051.82 TOTAL EXPENDITURES