

**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

James Krickeberg for Alderman

Street Address

1425 W Cudahy Ave

City, State and Zip Code

Milwaukee, WI 53221

OFFICE USE ONLY

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 _____
☐ July Continuing _____ ☐ Spring _____ ☐ Fall _____ ☒ Special _____
☐ September Continuing _____ ☒ Pre-Election _____ ☐ Termination Report
 also complete Schedule 4

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

| | Column A This Period | Column B Calendar Year-To-Date |
|---|-------------------------|--------------------------------------|
| 1A. Contributions (Including Loans) from Individuals | \$ 1691.14 | \$ 4892.39 |
| 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) | \$ 1691.14 | \$ 4892.39 |

2. DISBURSEMENTS

| | | |
|--|------------|------------|
| 2A. Gross Expenditures | \$ 1691.14 | \$ 4892.39 |
| 2B. Contributions to Committees (Transfers-Out) | \$ 0 | \$ 0 |
| TOTAL DISBURSEMENTS (Add totals from 2A and 2B) | \$ 1691.14 | \$ 4892.39 |

CASH SUMMARY

| | |
|---|------------|
| Cash Balance Beginning of Report | \$ 0 |
| Total Receipts | \$ 1691.14 |
| Subtotal | \$ 1691.14 |
| Total Disbursements | \$ 1691.14 |
| CASH BALANCE END OF REPORT | \$ 0 |
| INCURRED OBLIGATIONS (Balance at the Close of This Period-3A) | \$ 0 |
| LOANS (Balance at the Close of This Period-3B) | \$ 0 |

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

James Krickeberg

Signature of Candidate or Treasurer

James Krickeberg
Email: JamesKforD13@gmail.com

Date: 8/5/19

Daytime Phone: 262-442-4845

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.

Complete Committee Name

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 |
|---------|---|--|---------------------------|----------------|
| 7/2/19 | James Krickberg 1425 W Cudahy Ave Milwaukee, WI 53221 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | Realtor | \$116.16 | \$337.41 |
| 7/2/19 | " " Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | " " | \$75.00 | \$3392.41 |
| 7/8/19 | " " Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | " " | \$125.00 | \$3517.41 |
| 7/10/19 | " " Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | " " | \$175.00 | \$3692.41 |
| 7/15/19 | " " Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | " " | \$250.00 | \$3942.41 |
| 7/15/19 | " " Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | " " | \$685.00 | \$4,627.41 |
| 7/15/19 | " " Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | " " | \$170.21 | \$4,797.62 |

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 1596.37 \$4797.62

TOTAL ITEMIZED CONTRIBUTIONS

\$ 1596.37 \$4797.62

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$ 0 0

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ 1596.37 \$4797.62

Complete Committee Name _____

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 |
|---------|--|--|---------------------------|----------------|
| 7/15/19 | James Krickeberg 1425 W Codrhy Ave Milwaukee, WI 53221 | Realtor | \$94.77 | \$4892.39 |
| | 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

\$ 94.77 \$4892.39

TOTAL ITEMIZED CONTRIBUTIONS

\$ 94.77 \$4892.39

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$ 0 0

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ 94.77 \$4892.39

RECEIPTS
Contributions from Committees
(Transfers-In)

Complete Committee Name

James Wickberg for Alderman

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: <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 | |
| | 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-In) THIS PAGE | | \$ <u>0</u> |
| TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES | | \$ <u>0</u> |

Complete Committee Name

James Krickeberg for Alderman

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

| Date | Full Name, Mailing Address and Zip Code of Source of Income | Type of Income | Amount |
|------|--|----------------|--------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

SUBTOTAL OTHER INCOME THIS PAGE

\$ 0

TOTAL ITEMIZED OTHER INCOME

\$ 0

TOTAL OTHER INCOME

\$ 0

SCHEDULE 2-A
DISBURSEMENTS
Gross Expenditures

 Page 1 of 1

Complete Committee Name

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 |
|---------|--|---------------------------------------|----------|
| 7/2/19 | Creative Graphics Imaging, LLC 8729 W Greenfield Ave West Allis, WI 53214 Check if: <input type="checkbox"/> In-Kind Offset | Campaign paper marketing materials | \$116.16 |
| 7/2/19 | Facebook Inc. 1 Hacker Way Menlo Park, CA 94025 Check if: <input type="checkbox"/> In-Kind Offset | social media advertising | \$175.00 |
| 7/8/19 | " " | " " | \$125.00 |
| 7/10/19 | " " | " " | \$175.00 |
| 7/15/19 | " " | " " | \$250.00 |
| 7/15/19 | Sound by Design 2107 E Capitol Dr Shorewood, WI 53211 Check if: <input type="checkbox"/> In-Kind Offset | DJ Services campaign event | \$685.00 |
| 7/15/19 | Mario's Pizza (Italian Grill) 2012 W Layton Ave Milwaukee, WI Check if: <input type="checkbox"/> In-Kind Offset | Pizza for campaign event | \$170.21 |
| 7/15/19 | Pick N Save 250 W Holt Ave Milwaukee, WI 53207 Check if: <input type="checkbox"/> In-Kind Offset | Supplies/snacks for campaign event | \$94.77 |

| | |
|--|------------|
| SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE | \$ 1691.14 |
| TOTAL ITEMIZED EXPENDITURES | \$ 1691.14 |
| TOTAL UNITEMIZED EXPENDITURES | \$ 0 |
| TOTAL EXPENDITURES | \$ 1691.14 |

DISBURSEMENTS
Contributions To Committees
(Transfers-Out)

Complete Committee Name

James Krickeberg for Alderman

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

| Date | Full Name, Mailing Address and Zip Code | Amount | Y-T-D Total |
|--|---|--------|-------------|
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | | |
| <p align="right">SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE</p> | | \$ 0 | |
| <p align="right">TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES</p> | | \$ 0 | |

SCHEDULE 3-A
**Incurred Obligations Excluding Loans
ADDITIONAL DISCLOSURE**

 Page 1 of 1

Complete Committee Name

James Krickeberg for Alderman

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

| Date | Full Name, Mailing Address and Zip Code of Creditor | Outstanding Balance Beginning This Period | New Obligations or Additions This Period | Cumulative Payments This Period | Outstanding Balance At Close of This Period |
|------|---|---|--|---------------------------------|---|
| / / | | | | | |
| | | Nature of Debt (Purpose) | | | |
| / / | | | | | |
| | | Nature of Debt (Purpose) | | | |
| / / | | | | | |
| | | Nature of Debt (Purpose) | | | |
| / / | | | | | |
| | | Nature of Debt (Purpose) | | | |
| / / | | | | | |
| | | Nature of Debt (Purpose) | | | |
| / / | | | | | |
| | | Nature of Debt (Purpose) | | | |
| / / | | | | | |
| | | Nature of Debt (Purpose) | | | |

SUBTOTAL ITEMIZED OBLIGATIONS THIS PAGE

\$ 0

TOTAL ITEMIZED OBLIGATIONS

\$ 0

TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS

\$ 0

TOTAL INCURRED OBLIGATIONS

\$ 0

Loans
Individual, Committee or Commercial
ADDITIONAL DISCLOSURE

Complete Committee Name
James Krickeberg for Alderman

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 |
|-------------|--|---|-----------------------|------------------------------------|---|
| | | | | | |

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

\$ 0

TOTAL OUTSTANDING LOANS

\$ 0