	AMPAIGN FINANCE REPOR SCONSIN LOCAL COMMITI						
	Is this report an Amendment?		NO				
COMMITTEE IDENTIF	FICATION						
Name of Committee	Friends of Paula Phillips						
Address	3022 S 39th St						
City, State, ZIP	Milwaukee, WI 53215					OFFICE USE	ONLY
Please check if address is	different than previously reported	_					
NAME OF REPORT	July 2019 Continuing						
SUMMARY OF RECE	IPTS AND DISBURSEMENTS		Column A		Column B	Audited Tota	ıls
1. RECEIPTS		4	his Period		YTD	Office Use O	
A. Contributions include	ling Loans from Individuals	\$	-				•
	Committees (Transfers-In)	\$	-				
C. Other Income and 0	,	\$	-				
	dd totals from 1A, 1B, and 1C)	\$	-	\$	-		
2. DISBURSEMENTS		•					
A. Gross Expenditures	3	\$	200.00				
B. Contributions to Co	mmittees (Transfers-Out)	\$	-				
TOTAL DISBURSEME	ENTS (Add totals from 2A and 2B)	\$	200.00	\$	-		
CASH SUMMARY							
Cash Balance at Begir	nning of Report	\$	1,557.27				
Total Receipts		\$	-				
Subtotal		\$	1,557.27				
Total Disbursements		\$	200.00				
CASH BALANCE AT	END OF REPORT	\$	1,357.27				
INCURRED OBLIGAT	TIONS (at close of period)	\$	-	1			
LOANS (at close of pe	eriod)	\$	-				
I certify that I have examin	ned this report and to the best of my knowl		and belief it is tru	ie, co	rrect and compl	ete.	
Type or Print Name of Candidate	e or Treasurer	Signa	ture of Candidate or	Treas	urer	Date	7/13/2019
Claire Zautke			laire faut	the	•		
Treasurer		Email		_0		Daytime Phone	
Friends of Paula Phillips		clair	<u>e.zautke@gma</u>	aıı.c	<u>om</u>	414-940-3375	

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.

Print the completed report and file with your local clerk or election commission by the filing deadline. ETHCF-2LE (01/16)

SCHEDULE 1-A Contributions Including Loans from Individuals

COMMENTS																				
TTD																				
AMOUNT																				
OCCUPATION																				
ZIP																				
ST																				
CITY																				
ADDRESS																				
FIRST																				
LAST																				
DATE																				
CONDUIT																				]
QNIX-NI																				

**Contributions from Committees** 

	 _			 	_	_		 _	 _	 _	 _	_	_	_		_	_	_	_	_		Т	 _	_
COMMENTS																								
YTD																								
AMOUNT																								
ZIP																								
ST		İ																						
CITY																								
ADDRESS																								
Ethics ID#																								
COMMITTEE NAME																								
DATE																								
KIND KIND															Ī			T	Ī				]	

Other Income and Commercial Loans

DATE	NAME	ADDRESS	CITY	ST	ZIP	REASON FOR INCOME	AMOUNT	COMMENTS
				П				
				1				

**Gross Expenditures** 

COMMENTS																		
AMOUNT	\$ 200.00																	
PURPOSE	53209 campaign contribution																	
ZIP	53209																	
ST	MI																	
CITY	Milwaukee																	
ADDRESS	PO Box 90084																	
NAME	waukee , District 1																	
DATE	03/31/19																	
IN-KIND																		

## SCHEDULE 2-A

**Contributions to Committees** 

COMMENTS																			
YTD O																			
AMOUNT																			
ZIP																			
ST																			
CITY																			
ADDRESS																			
Ethics ID#																			
NAME																			
DATE																			
IN-KIND																			

Incurred Obligations Excluding Loans

Outstanding Bal Close of	Period		•	•	•	•	•	•	-	•		-												
Payment This   E		Г	\$ \$	\$	\$	\$	\$	\$	\$	\$	\$ \$	\$												
New Obligations																								
Outstanding Balance Beg	of Period																							
	PURPOSE																							
	ZIP																							
	ST	Г																					1	1
	CITY																							
	ADDRESS																							
	NAME																							
	DATE																							

Loans: Individual, Committee or Commercial

Guarantor (if any)	Name and Address																					
Outstanding Balance End	of Period	- \$	- \$	- \$	- \$	- \$	- ج	· \$	· \$	· \$	- ج	- \$										
Payments Payments	This Period																					
New Loans	This Period																					
Outstanding Balance Beg	of Period																					
	ZIP																					
	ST																					
	CITY																					
	ADDRESS																					
	NAME																					
	DATE																					

## SCHEDULE 4 TERMINATION REQUEST

A committee may terminate its registration and reporting requirements if the committee will no longer receive

- contributions, make disbursements or incur obligations, and the obligations and cash balance have been reduced to zero.
- Candidates may not terminate prior to the election in which they are participating.

Please read carefully and, if necessary, indicate how residual committee funds have been disposed of or if

- outstanding loans or obligations have been forgiven. Sign and date the termination request at the bottom of this page.
- Make sure the termination box on the cover page of this report is checked.

Please note: An audit must be completed and all obligations, including settlement offers, fulfilled before termination can be granted. All records must be maintained until 3 years after the date of an election in which the registrant participates, even if termination is granted. (Per Wis. Stats. 11.0201(4), 11.0301(4), 11.0401(4), 11.0501(4), 11.0601(4), 11.0801(4), 11.0901(4))

11.0601(4	, 11.0801(4), 11.0901(4))	
	DISPOSAL OF RESIDUAL F	LINDS
TH	IS INFORMATION SHOULD ALSO BE INCLUDED ON	
DATE	RECIPIENT	AMOUNT
		<u> </u>
	LOAN OR REDT FORCIVE	1500
I haraby for	LOAN OR DEBT FORGIVEN give all personal loans or have assumed responsibility for any	
committee.	give all personal loans of have assumed responsibility for any	and all debts of my campaign
DATE	Endorser, Guarantor, or Creditor	AMOUNT
TERMINA'	ΓΙΟΝ REQUEST. I hereby request that the committee re	egistration be terminated. I declare that the
	has not incurred any obligations and does not anticipate	
	eceiving any further contributions or making any disburs	
has been r	educed to zero and that all remaining funds have been o	disposed of in the manner prescribed by law.
Signature	of Candidate or Treasurer	Date