CAMPAIGN FINANCE REPORT
WISCONSIN LOCAL COMMITTEE

Is this report an Amendment? **NO**

COMMITTEE IDENTIFICATION	
Name of Committee	BobForMPS
Address	1247 E. Burleigh Street
City, State, ZIP	Milwaukee, WI 53212

OFFICE USE ONLY

Please check if address is different than previously reported ____

NAME OF REPORT Jan 20_X_ Continuing Pre-Primary 20__ Spring Fall Special
July 20__ Continuing Pre-election 20__ Spring Fall Special
September 20__ Continuing

SUMMARY OF RECEIPTS AND DISBURSEMENTS	**Column A**	**Column B**	**Audited Totals**	
1. RECEIPTS	**This Period**	**YTD**	**Office Use Only**	
A. Contributions including Loans from Individuals	$ -			
B. Contributions from Committees (Transfers-In)	$ -			
C. Other Income and Commercial Loans	$ -			
TOTAL RECEIPTS (Add totals from 1A, 1B, and 1C)	$ -			
2. DISBURSEMENTS				
A. Gross Expenditures	$ -			
B. Contributions to Committees (Transfers-Out)	$ -			
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	$ -	$ -		
CASH SUMMARY				
Cash Balance at Beginning of Report	$ 40.75			
Total Receipts	$ -			
Subtotal	$ 40.75			
Total Disbursements	$ -			
CASH BALANCE AT END OF REPORT	$ 40.75			
INCURRED OBLIGATIONS (at close of period)	$ -			
LOANS (at close of period)	$ -			

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
Robert E Peterson

Signature of Candidate or Treasurer
Bob Peterson

Date 1/13/2021

Email
bobformps@gmail.com

Daytime Phone 414-534-864

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)