	FINANCE REPORTITEES OF WISCO		
Is This Report an Amendment: Yes		RECEIVED	
		I have bed been I V have had	
Instructions for completing schedules are on the back COMMITTEE IDENTIFICATION	t of each schedule.	71 JAN -8 P 3:	29
Name of Committee	7		to the second
Manie Woodward for Edy Street Address	oztish 1	ECTION COMMISS	OFFICE HEF ONLY
1920 W. Mc Kinley Av.	enue		OFFICE USE ONLY
Milwaukee Wisconsin	53205		
Please check if address is different than previously reported, and		istration Statement in t	he back of this form.
NAME OF REPORT			
January Continuing 21 Pre-Primary July Continuing September Continuing Pre-Election	Spring I	Fall Special	Termination Report
			•
SUMMARY OF RECEIPTS AND DISBURSEMENTS	Column A This Period	Column B Calendar	
1. RECEIPTS		Year-To-Date	
1A. Contributions (Including Loans) from Individuals	\$ - 0 -	\$	
1B. Contributions from Committees (Transfers-In)	\$	\$	
1C. Other Income and Commercial Loans	\$	\$	
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 0	\$	
2. DISBURSEMENTS			
2A. Gross Expenditures	.412.00.	\$	
2B. Contributions to Committees (Transfers-Out)	\$ 71 -	\$	
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$412.001	\$	
CASH SUMMARY	"/		
Cash Balance Beginning of Report	\$ 904,27		
Total Receipts	\$41200		
Subtotal	\$1,316.27		
Total Disbursements	\$ 412,00		
CASH BALANCE END OF REPORT	\$904,27		
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$		
LOANS (Balance at the Close of This Period-3B)	\$412,00		
I certify that I have examined this report and to the best of my	y knowledge and belief it is	true, correct and com	plete.

Type or Print Name of Candidate or Treasurer	Signature of Candidate or Treasurer	Date: January 9, 2021
11/20/1071	Signature of Candidate or Treasurer Line Woodward Line was 1 1400 Jmcri Tech Line was 1 1400 Jmcri Tech	, n & () 10/2
Annie Woodward	Email	Daytime Phone (4) 342 - 18/ 3

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.

Instructions for Completing Summary Page of Form ETHCF-2L

Instructions for Completing Schedules are on the Back of Each Schedule

Committee Identification

- ▶ Print or type the complete name and mailing address of your committee.
- ▶ If the report is an amendment to a previous report filed, check the "yes" box. If the report is NOT an amendment, check the "no" box.

Name of Report

► Check the box next to the name of the report being filed, and enter the correct calendar year. For information concerning filing dates and report names, refer to the CFIS website – https://cfis.wi.gov.

Summary of Receipts and Disbursements

► Committees should complete the detailed pages in Schedules 1-A through 3-B before completing this summary section of the report form.

Receipts

- **1A. Contributions (Including Loans) From Individuals:** Enter the amount of Total Contributions from Individuals (Schedule 1-A) in Column A of the Summary page. Add the amount entered in Column A to contributions previously reported for this calendar year, if any, and enter the amount in Column B, Calendar Year-to-Date.
- **1B. Contributions From Committees (Transfers-In):** Enter the amount from Total Contributions (Transfers-In) Received From Committees (Schedule 1-B) in Column A of the Summary page. Add the amount entered in Column A to contributions previously reported for this calendar year, if any, and enter the amount in Column B, Calendar Year-to-Date.
- **1C. Other Income and Commercial Loans:** Enter the amount of Total Other Income (Schedule 1-C) in Column A. Add the amount entered in Column A to other income previously reported for this calendar year, if any, and enter the amount in Column B, Calendar Year-to-Date.
- **Total Receipts:** Add the amounts entered on lines 1-A, 1-B and 1-C, in Column A and enter the total in Total Receipts. Add the amount of Total Receipts previously reported, if any, and enter the amount in Column B, Calendar Year-to-Date.

Disbursements

- **2A. Gross Expenditures:** Enter the amount from Total Expenditures (Schedule 2-A) in Column A of the Summary page. Add the amount in Column A to expenditures previously reported for this calendar year, if any, and enter the amount in Column B, Calendar Year-to-Date.
- **2B. Contributions to Committees (Transfers-Out):** Enter the amount from Total Contributions (Transfers-Out) Made to Committees (Schedule 2-B) in Column A of the Summary page. Add the amount in Column A to contributions previously reported for this calendar year, if any, and enter the amount in Column B, Calendar Year-to-Date.

Total Disbursements: Add the amounts entered on lines 2-A and 2-B in Column A and enter the total in Total Disbursements. Add this amount to Total Disbursements previously reported, if any, and enter the amount in Column B, Calendar Year-to-Date.

Cash Summary

Cash Balance Beginning of Report: If this report is the first report filed by the committee, the cash balance will be zero. If this is not the first report filed by the committee, enter the cash balance from the end of the last report period. The beginning cash balance of a report must *always* be the *same* as the ending cash balance of the prior report.

Total Receipts: Enter the amount from Total Receipts in Column A of the Summary page.

Subtotal: Add Cash Balance Beginning of Report to Total Receipts and enter the amount.

Total Disbursements: Enter the amount from Total Disbursements in Column A of the Summary page.

Cash Balance End of Report: Subtract Total Disbursements from Subtotal and enter the amount. The cash balance at the end of the report period should **equal** the reconciled balance in the checking account *plus* any savings or investment accounts.

Incurred Obligations: Enter the amount from Total Incurred Obligations (Schedule 3-A) in Column A of the Summary page. Incurred obligations must be carried forward on **each** report until paid in full.

Loans: Enter the amount from the Total Outstanding Loans (Schedule 3-B) in Column A of the Summary page. Loans must be carried forward on each report until paid in full.

Sign and Date the Report

The treasurer or candidate must sign and date each report filed. Each report must be complete, correct, and in compliance with the reporting format. Please include a daytime phone number and a contact person if someone other than the treasurer prepares the report.



RECEIPTS Contributions (Including Loans) From Individuals

Page	of	
. 490		

Contributions (including Loans) From individuals					
Complete Committee Name					
Instructions fo	r completing schedules are on the back of each scl Full Name, Mailing Address and Zip Code	hedule. Occupation (if year-to-date total exceeds \$200)	Amount of	Y-T-D	
Date	Of Contributor	Cocupation (il year-to-date total exceeds \$200)	Contribution	Total	
		1 1			
	Check if: ☐ In-Kind ☐ Loan☐ Conduit – Ethics ID#		4.		
	Check II. [1] III-Kilid [1] Loan [1] Conduit – Ethics ID#				
·					
	Check if: ☐ In-Kind ☐ Loan☐ Conduit – Ethics ID#				
	Check if: In-Kind Loan Conduit – Ethics ID#				
		1 1 1			
	Check if: In-Kind Loan Conduit – Ethics ID#				
	Check if: In-Kind Loan Conduit – Ethics ID#			-	
	Observation Colored Co				
	Check if: In-Kind Loan Conduit – Ethics ID#				
	Check if: ☐ In-Kind ☐ Loan☐ Conduit – Ethics ID#				
	Check II. [1] III-Kind [1] Loan[1] Conduit – Ethics ID#				
	·				
		-			
	Check if: 🔲 In-Kind 🔲 Loan 🖟 Conduit – Ethics ID#				
	Oncor ii. [a ii-rand [a coaila Conduit - Etilics ID#				
	SUBTOTAL	ITEMIZED CONTRIBUTIONS THIS PAGE	\$		
		TOTAL ITEMIZED CONTRIBUTIONS	\$		
		IVMOUS CONTRIBUTIONS \$40 OR I ESS	•		

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS | \$

Instructions for Completing Schedule 1-A

RECEIPTS - Contributions (Including Loans) From Individuals

General Instructions:

- ▶ Print or type the complete name of your committee in the box provided.
- ▶ Duplicate as many pages as you will need in order to report contributions, including loans from individuals, on this form.
- ▶ Enter the number of Schedule 1-A pages in the upper right corner of the form.

Date: Enter the date (month, day, year) each contribution was **RECEIVED**. Do **not** enter the date that appears on the contributor's check or the date deposited, unless it is the same as the date received (is in committee's possession and control).

Full Name, Mailing Address, and Zip Code:

- 1. Enter the full name and address of the contributor.
- 2. For single or cumulative contributions totaling over \$200 in a calendar year: Enter the full name and address of the contributor. Enter the **occupation**.

Calendar Year-to-Date Total: Add contributions previously received this calendar year, from this contributor to the contributions received in this report period. The Calendar Year-to-Date Total for an individual must always be entered. The Current Amount and Year-to-Date Total will be identical on the first report period of the calendar year. Once the individual's Calendar Year-to-Date Total exceeds \$200, you must enter the contributor's occupation.

Subtotal Itemized Contributions this page: Enter the total of all the contributions listed on this page. If additional pages are used, enter the subtotal for each separate page.

Total Itemized Contributions: Add the subtotals from all pages of Schedule 1-A. If more than one page, enter the total on only the last page of Schedule 1-A.

Total Anonymous Contributions \$10 or less: Enter the total of anonymous contributions of \$10 or less only on the last page of Schedule 1-A.

Total Contributions Received from Individuals: Add the total **Itemized** contributions to the Total **Anonymous** Contributions \$10 or Less and enter the amount **only** on the last page of Schedule 1-A.

Special Instructions:

- ♦ Contributions and loans from individuals on Schedule 1-A include any cash, personal or individual loans, purchase of tickets to fundraising events, memberships, gifts, advances, in-kind contributions, and all other personal contributions from an individual **including** the candidate. An in-kind contribution is any goods, property, or services provided to the committee free or for less than the fair market value. (Volunteer services are not a contribution).
- ◆ In-kind contributions from individuals must also be reported as in-kind expenditures on Schedule 2-A to avoid distortion of the cash balance.
- When the contribution is in-kind, a loan, or is received through a conduit, check the appropriate box in the section where the contribution is listed. If you receive a personal check or cash, no box needs to be checked.
- Contributions from individuals transferred through conduits are reported on Schedule 1-A under the individual contributor's name with the name of the conduit listed. The transmittal letter accompanying the conduit check, identifies the conduit and lists the individuals who are the original sources of the contributions. These contributions are subject to itemization on the same basis as other individual contributions; if over \$200, the occupation must be provided.
- ◆ Any individual loans, either from the candidate or from another individual, must be reported on Schedule 1-A and on Schedule 3-B, Additional Disclosure, Loans, until paid in full. Loans from individuals are subject to individual contribution limits (see Campaign Finance Overview).
- ♦ Each contributor's name, address, and amount must be listed separately. Contributions from joint accounts shall be reported as coming from the individual signing the check, <u>unless the signor indicates otherwise</u>. If the amount is divided, each individual must be itemized separately. Do not report a contribution as coming from more than one individual.
- ♦ <u>All receipts</u>, including those from raffles, auctions, garage sales or other similar events <u>must be itemized</u> unless the contribution is anonymous and totals \$10 or less.
- ◆ Do **not** report contributions from political action committees, political party committees, or other candidate committees on Schedule 1-A. These contributions must be reported on Schedule 1-B.



RECEIPTS Contributions from Committees (Transfers-In)

Page	of	

Complete Committee Name		

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: ☐ In-Kind ☐ Loan	
	Check if: 📵 In-Kind 📵 Loan	
	Check if: ☐ In-Kind ☐ Loan	
	Check if: 🗓 In-Kind 🗓 Loan	
	Check if: 🔲 In-Kind 📋 Loan	
	Check if: ☐ In-Kind ☐ Loan	
	Check if: ☐ In-Kind ☐ Loan	
	Check if:	
	Check if:	
970		
	SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE	\$
	TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES	\$

Note: Use of this form is required by the Ethics Commission for registration of a political committee or conduit under Chapter 11 of Wisconsin Statute. Completion of this form is mandatory for committees that file on paper. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose.

Item 1. Is this an amendment? Check the appropriate box. If "Yes" is checked, enter the committee ID number if you have one. If "No' is checked, proceed directly to Section A.

Section A: General Information. All candidates, committees, and conduits must complete section A.

Item A1: Committee/Conduit Name. All committees and conduits must have a name. It is not required that the name include the candidate or organization's name, but it is recommended, e.g., Friends of John Smith. A political party committee wishing to operate under the same name as a state political party committee must receive authorization from that state party (WIS. STAT. § 11.0101(26)(a)1).

Depository Institution Information. All committees and conduits must designate a depository institution. While it is recommended that all committees have a designated campaign depository account, candidates who will serve as their own treasurer may designate a single personal account to serve as the committee depository account and may intermingle personal and campaign funds (Wis. Stat. § 11.0201(2)(b)).

Treasurer/Administrator Information. Each committee must appoint a treasurer and each conduit must appoint an administrator. Any adult may serve as a treasurer or administrator. A candidate may serve as his or her own treasurer. If a candidate is serving as their own treasurer, please indicate so in this section.

Section B: Candidate Committees. Candidate committees must complete section B. No other committee type should complete section B.

Section C: Recall Committees. Recall committees must complete section C. No other committee type should complete section C.

Section D: PAC, IEC, and Conduits. Political action committees, independent expenditure committees, and conduits must complete section D. No other committee type should complete section B. All fields in section D refer to the sponsoring organization's contact information.

Section E: Political Party and Legislative Campaign Committees. Only political party committees and legislative campaign committees should complete section E.

Item E2. A political party or a legislative campaign committee may establish a segregated fund for purposes other than making contributions to a candidate committee or making disbursements for express advocacy (Wis. STAT. § 11.1104(6)). It is recommended that the committee maintain the segregated fund in a depository account separate from the primary account, but it is not required.

Items E3 - E7. If the segregated fund is maintained with the same depository institution as the primary account, write "Same as primary account." in E3.

Section F: Referendum Committees. Only referenda committees should complete section F.

Section G: Certification. All committees and conduits must complete section G.

SCHEDULE 2-A

DISBURSEMENTS Gross Expenditures

Page	of

TOTAL EXPENDITURES \$ 4/2, 00

Complete Committee Name

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 Viana Jordon
3216 N. Tan Street
Milwaukee, WI 53206 *Komination* 360.00 Signatures Supplies PICK'N Save fice Depot Sapplies Check if: In-Kind Offset Printing Check if: In-Kind Offset SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE TOTAL ITEMIZED EXPENDITURES TOTAL UNITEMIZED EXPENDITURES

SCHEDULE 2-B

DISBURSEMENTS Contributions To Committees (Transfers-Out)

Page of	i ago	of
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Complete Comm	ttee Name		
Instructions for			
Date	completing schedules are on the back of each schedule. Full Name, Mailing Address and Zip Code	Amount	Y-T-D Total
			Total
	Check if: In-Kind Loan		
	Check if: In-Kind Loan		
	CHECK II. [1] III-MIIIU [1] LOAN		
	Check if: In-Kind Loan		
	Check if: 🔲 In-Kind 🗒 Loan		
	Check if: In-Kind Loan		
		4,	
	Check if: □ In-Kind □ Loan		· · · · · · · · · · · · · · · · · · ·
	Check if: In-Kind Loan		
	Check if: ☐ In-Kind ☐ Loan		
	Check if: In-Kind Loan		
	CURTOTAL CONTRIBUTIONS (Tarantara O.A) THE BACE	¢	
	SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE	\$	
	TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES	\$	

SCHEDULE 3-A

Incurred Obligations Excluding Loans ADDITIONAL DISCLOSURE

Page	of	

Complete Co	ommittee Name					
Instructions	for completing schedules are on the back of each	schedule.				
		Outstanding Balance Beginning This Period	New Obligations or Additions This Period	Cumul T	ative Payments his Period	Outstanding Balance At Close of This Period
Date	Full Name, Mailing Address and Zip Code of Creditor					
/ /		Notice of Dobb (Doseson)				
		Nature of Debt (Purpose)				
Date	Full Name, Mailing Address and Zip Code of Creditor					
1 1						
		Nature of Debt (Purpose)				L
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)		· 3**		
Date	Full Name, Mailing Address and Zip Code of Creditor					
l l	Tuli Name, Mailing Address and 2p Code of Creditor					
, ,		Nature of Debt (Purpose)				
Date	Full Name, Mailing Address and Zip Code of Creditor					
1 1		12.11				
		Nature of Debt (Purpose)				
Date	Full Name, Mailing Address and Zip Code of Creditor					
1 1						
		Nature of Debt (Purpose)				1
Date	Full Name, Mailing Address and Zip Code of Creditor					
/ /		Nature of Debt (Purpose)				
<u> </u>		<u> </u>				
		SUBTOTAL ITEMIZE	D OBLIGATIONS THIS	PAGE	\$	
		тот	AL ITEMIZED OBLIGA	TIONS	\$	
		TOTAL UNITEMIZED	OBLIGATIONS \$20 OR	LESS	\$	
		TOTA	L INCURRED OBLIGA	TIONS	\$	

SCHEDULE 3-B

Complete Committee Name

Loans Individual, Committee or Commercial ADDITIONAL DISCLOSURE

Page	of	

Instructions for completing schedules are on the back of each s	schedule.					
Full Name, Mailing Address and Zip Code of Loan Source Annie Woodward 1920 W. M. Kinley Ave 1831 Milwaykee, WI 53285		Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period	
1 8 21 Milwzykee, WI S List All Endorsers or Guarantors (if any)	53285	0	412.00		4/2.08	
Full Name, Mailing Address and Zip Code	Occupation					
of Guarantor						
	Amount Guarantee	ed Outstanding				
Full Name, Mailing Address and Zip Code of Guarantor	Occupation					
ST Statuted	Amount Guarantee	ed Outstanding				
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	
l l	Pate /					
List All Endorsers or Guarantors (if any)						
Full Name, Mailing Address and Zip Code of Guarantor	Occupation					
	Amount Guarantee	Amount Guaranteed Outstanding				
	\$	•				
Full Name, Mailing Address and Zip Code of Guarantor						
Amount Guaranteed Outstanding						
	\$					
Full Name, Mailing Address and Zip Code of Loan Source Date		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 Occupation of Guarantor						
	Amount Guarantee	ed Outstanding				
	\$					
Full Name, Mailing Address and Zip Code of Guarantor						
Amount Guaranteed Outstanding						
	\$					