

CAMPAIGN FINANCE REPORT
STATE OF WISCONSIN
ETHCF-2

COMMITTEE IDENTIFICATION

Filing Period Name:	July Continuing 2016 Covers all activity from 01/01/2016 through 06/30/2016	OFFICE USE ONLY GAB ID: 0100823
Name of Committee/Corporation:	Prosser Defense Fund	
Street Address:	c/o Aspect Consulting LLC PO Box 620066	
City, State and Zip:	Middeton, WI 53562	

<i>SUMMARY OF RECEIPTS AND DISBURSEMENTS</i>	Column A This Period	Column B Calendar Year-To-Date
1. RECEIPTS		
1A. Contributions (Including Loans) from Individuals	\$0.00	\$0.00
1B. Contributions from Committees (Transfers-In)	\$25,000.00	\$25,000.00
1C. Other Income and Commercial Loans	\$0.00	\$0.00
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$25,000.00	\$25,000.00
2. DISBURSEMENTS		
2A. Gross Expenditures	\$25,000.00	\$25,000.00
2B. Contributions to Committees (Transfers-Out)	\$0.00	\$0.00
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$25,000.00	\$25,000.00

CASH SUMMARY

Cash Balance Beginning of Report *	\$869.47
Total Receipts	\$25,000.00
Subtotal	\$25,869.47
Total Disbursements	\$25,000.00
CASH BALANCE END OF REPORT *	\$869.47
INCURRED OBLIGATIONS	
(Balance at the Close of This Period-3A)	\$46,000.00
LOANS (Balance at the Close of This Period-3B)	\$0.00

**Cash Balance as reported by committee*

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: Klauser, James	Signature of Candidate or Treasurer: Kate Lind Date: _____ Daytime Phone: _____ Email: Kate@aspectcompliance.com
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NOTE: The information on this form is required by 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.

ETHCF-2 (Rev. 12/03) This form is prescribed by the Wisconsin Ethics Commission, P.O. Box 7984, Madison, WI 53707-7984, 608-266-8005.

SCHEDULE 1-A**RECEIPTS
Contributions From Individuals**

Complete Committee Name: Prosser Defense Fund

Date	Full Name	Address	Occupation	Amount	YTD
Total Anonymous Contributions				\$0.00	
Grand Total				\$0.00	
Non-Monetary (-):				\$0.00	
Loan Forgiven (-):				\$0.00	
Total				\$0.00	

SCHEDULE 1-B**RECEIPTS
Contributions from Committees
(Transfers-In)**

Complete Committee Name: Prosser Defense Fund

Date	Full Name	Address	Amount	YTD
In-Kind				
04/07/2016	Republican Party of Wisconsin	148 East Johnson Street, Madison, WI 53703	\$25,000.00	\$25,000.00
Sub Total			\$25,000.00	
Grand Total			\$25,000.00	
Non-Monetary (-):			\$0.00	
Total			\$25,000.00	

SCHEDULE 1-C**RECEIPTS****Other Income and Commercial Loans**

Complete Committee Name: Prosser Defense Fund

Date	Full Name	Address	Amount	YTD
Total			\$0.00	

SCHEDULE 2-A**DISBURSEMENTS
Gross Expenditures**

Complete Committee Name: Prosser Defense Fund

Date	Communication Date	Full Name	Address	Vendor Name	Vendor Address	Expense Purpose	Amount
In-Kind							
04/07/2016		Republican Party of Wisconsin	148 East Johnson Street, Madison, WI 53703	Dan Morse Consulting	5205 Barton Road, Madison, WI 53717	Consulting Fees - General	\$25,000.00
Sub Total							\$25,000.00
Grand Total							\$25,000.00
Non-Monetary (-):							\$0.00
Total							\$25,000.00

SCHEDULE 2-B**DISBURSEMENTS
Contributions To Committees
(Transfers-Out)****Complete Committee Name:** Prosser Defense Fund

Date	Full Name	Address	Vendor Name	Vendor Address	Amount
Grand Total					\$0.00
Non-Monetary (-):					\$0.00
Registrant In-Kind Sub Total (-):					\$0.00
Total					\$0.00

SCHEDULE 3-A**ADDITIONAL DISCLOSURE**
Incurred Obligations Excluding Loans**Complete Committee Name:** Prosser Defense Fund**Beginning Incurred Obligation Amount:** \$46,000.00

Date	Full Name	Address	Amount
Grand Total			\$0.00

Date	Full Name	Amount Paid
Grand Total		\$0.00
Outstanding Incurred Obligations End of Report		\$46,000.00

SCHEDULE 3-B**ADDITIONAL DISCLOSURE**
Loans
Individual, Committee or Commercial**Complete Committee Name:** Prosser Defense Fund**Beginning Loan Balance:** \$0.00

Date	Full Name	Address	Amount
Grand Total			\$0.00

Date	Full Name	Amount Paid
Grand Total		\$0.00
Outstanding Loans End of Report		\$0.00