

**CAMPAIGN FINANCE REPORT
STATE OF WISCONSIN**

Is This Report an Amendment: Yes No

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

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COMMITTEE IDENTIFICATION

Name of Committee: Recall Dave Hansen
Street Address: 935 Elmore St.
City, State and Zip Code: Green Bay WI 54303

GAB ID Number: 6000006

Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form.

REPORT PERIOD

January Continuing Pre-Primary Spring Fall Special Termination Report also complete Schedule 4
 July Continuing Pre-Election

SUMMARY OF RECEIPTS AND DISBURSEMENTS

	Column A This Period	Column B Calendar Year-To-Date
1. RECEIPTS		
1A. Contributions (Including Loans) from Individuals	\$ 245	\$ 1159.45
1B. Contributions from Committees (Transfers-In)	\$ 0	\$ 200
1C. Other Income and Commercial Loans	\$ 0	\$ 0
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 245	\$ 1359.45
2. DISBURSEMENTS		
2A. Gross Expenditures	\$ 263.22	\$ 1359.45
2B. Contributions to Committees (Transfers-Out)	\$ —	\$ —
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 263.22	\$ 1359.45

CASH SUMMARY

Cash Balance Beginning of Report	\$ 18.22
Total Receipts	\$ 245
Subtotal	\$ 263.22
Total Disbursements	\$ 263.22
CASH BALANCE END OF REPORT	\$ 0
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ —
LOANS (Balance at the Close of This Period-3B)	\$ —

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 <u>David VanderLeest</u>	Signature of Candidate or Treasurer <u>David VanderLeest</u>	Date: <u>4/26/2011</u>	Daytime Phone: <u>920-672-8513</u>
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NOTE: The information on this form is subject to the penalties of ss. 11.60, 11.61, Wis. Stats. GAB-2S (Rev. 12/09)



0600006-70

provide the information may subject you to the penalties of Board, P.O. Box 7984, Madison, WI 53707-7984

RECEIPTS
Contributions (Including Loans) From Individuals

Complete Committee Name
Recall Dave Hansen

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

Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation, Name and Address of Principal Place of Employment (if year-to-date total exceeds \$100)	Amount of Contribution	Y-T-D Total
3/24/11	Michael J. Holasek 3141 Van Norman Av Cudahy WI 53110 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit Conduit GABID#:		100	
3/24/11	Daniel ECKERT N 6038 Cty TK D Kewaunee WI 54216 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit Conduit GABID#:		20	
3/27/11	TE Schmidt Roland Rd Green Bay WI 54303 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit Conduit GABID#:		100	
4/25	Mark Mayer 1386 Mayer St Menasha WI 54952 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit Conduit GABID#:		25	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit Conduit GABID#:			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit Conduit GABID#:			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit Conduit GABID#:			
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE			\$ 245	
TOTAL ITEMIZED CONTRIBUTIONS			\$	
TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS			\$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS			\$ 245	

Complete Committee Name

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Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
4/26/2011	Thomas Mattson 2980 Clifford Ct Green Bay WI 54311 Check if: <input type="checkbox"/> In-Kind Offset	Rent	200
4/26/2011	David VanderLeest 10789 Cty Rd G Coleman WI 54112 Check if: <input type="checkbox"/> In-Kind Offset	refund of Contribution	63.22
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 263. ²²
TOTAL ITEMIZED EXPENDITURES	\$
TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS	\$
TOTAL EXPENDITURES	\$ 263. ²²

TERMINATION REQUEST

Complete Committee Name
 Recall Dave Hansen

GAB ID Number
 0600006

- A committee may terminate its registration and reporting requirements if the committee will no longer receive contributions, make disbursements or incur obligations, and the cash balance and obligations have been reduced to zero.
- Candidates may not terminate prior to the election in which they are participating.
- Non-candidate committees registered with the state must pay the \$100 filing fee if they have over \$2500 in total disbursements for the calendar year.
- 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 with the Board, including settlement offers, fulfilled before termination can be granted. All records must be maintained until termination is granted.

DISPOSAL OF RESIDUAL FUNDS <small>(THIS INFORMATION SHOULD ALSO BE INCLUDED ON SCHEDULE 4, PART 1)</small>		
Date	Recipient	Amount
4/26/2011	David Vanderdeest	\$63. ²²

LOAN OR DEBT FORGIVENESS <small>(THIS INFORMATION SHOULD ALSO BE INCLUDED ON SCHEDULE 4, PART 1)</small>		
Date	Endorser, Guarantor, or Creditor	Amount

TERMINATION REQUEST. I hereby request that the committee registration be terminated. I declare that the committee has not incurred any obligations and does not anticipate incurring any. The committee does not anticipate receiving any further contributions or making any disbursements. I further state that the cash balance has been reduced to zero and that all remaining funds have been disposed of in the manner prescribed by law.

David Vanderdeest
 Signature of Candidate or Treasurer

4/26/2011
 Date