

CAMPAIGN FINANCE REPORT
STATE OF WISCONSIN
CF-2

COMMITTEE IDENTIFICATION

Filing Period Name:	Fall Pre-Primary 2018 Covers all activity from 07/01/2018 through 07/30/2018	OFFICE USE ONLY Committee ID: 0102822
Name of Committee/Corporation:	postlewaiteforassembly	
Street Address:	PO Box 1544	
City, State and Zip:	Eau Claire, WI 54702-1544	

<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	\$645.00	\$4,635.00
1B. Contributions from Committees (Transfers-In)	\$0.00	\$0.00
1C. Other Income and Commercial Loans	\$0.00	\$0.00
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$645.00	\$4,635.00
2. DISBURSEMENTS		
2A. Gross Expenditures	\$0.00	\$3,036.18
2B. Contributions to Committees (Transfers-Out)	\$0.00	\$0.00
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$0.00	\$3,036.18

CASH SUMMARY

Cash Balance Beginning of Report *	\$953.82	
Total Receipts	\$645.00	
Subtotal	\$1,598.82	
Total Disbursements	\$0.00	
CASH BALANCE END OF REPORT *	\$1,598.82	
INCURRED OBLIGATIONS		
(Balance at the Close of This Period-3A)	\$0.00	
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: Postlewaite, Julie Marie	Signature of Candidate or Treasurer: Julie Postlewaite	Date:	Daytime Phone:	Email: rjpostlewaite@charter.net
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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.

CF-2 (Rev. 04/16) 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: postlewaiteforassembly

Date	Full Name	Address	Occupation	Amount	YTD
Monetary					
07/05/2018	Ryberg, Mary	1213 Timber Rd, Eau Claire, WI 54701		\$100.00	\$100.00
07/09/2018	Burke, Michael	504 Blue Karner Dr, Altoona, WI 54720		\$100.00	\$100.00
07/18/2018	Ayres, Fred	3601 Tamarack Ln, Eau Claire, WI 54701		\$100.00	\$100.00
07/24/2018	Campbell, Scott	6285 Aspen Meadow Ct, Eau Claire, WI 54703		\$25.00	\$25.00
07/24/2018	O'Brien, Marcene	294 Club View Ln, Altoona, WI 54720		\$100.00	\$100.00
07/24/2018	O'Brien, Michael	603 Main St, Eau Claire, WI 54701		\$100.00	\$150.00
07/24/2018	O'Brien, Sam	603 Main St, Eau Claire, WI 54701		\$20.00	\$20.00
07/24/2018	O'Brien, Tim	1417 Frederic, Eau Claire, WI 54701		\$100.00	\$200.00
Sub Total				\$645.00	
Total Anonymous Contributions				\$0.00	
Grand Total				\$645.00	
Non-Monetary (-):				\$0.00	
Loan Forgiven (-):				\$0.00	
Total				\$645.00	

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

Complete Committee Name: postlewaiteforassembly

Date	Full Name	Address	Amount	YTD
			Grand Total	\$0.00
			Non-Monetary (-):	\$0.00
			Total	\$0.00

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

Complete Committee Name: postlewaiteforassembly

Date	Full Name	Address	Amount	YTD
Total			\$0.00	

SCHEDULE 2-A**DISBURSEMENTS
Gross Expenditures**

Complete Committee Name: postlewaiteforassembly

Date	Communication Date	Full Name	Address	Vendor Name	Vendor Address	Expense Purpose	Amount
Grand Total							\$0.00
Non-Monetary (-):							\$0.00
Total							\$0.00

SCHEDULE 2-B**DISBURSEMENTS
Contributions To Committees
(Transfers-Out)**

Complete Committee Name: postlewaiteforassembly

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:** postlewaiteforassembly**Beginning Incurred Obligation Amount:** \$0.00

Date	Full Name	Address	Amount
Grand Total			\$0.00

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

SCHEDULE 3-B**ADDITIONAL DISCLOSURE**
Loans
Individual, Committee or Commercial**Complete Committee Name:** postlewaiteforassembly**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