

CAMPAIGN FINANCE REPORT  
STATE OF WISCONSIN  
GAB-2

*COMMITTEE IDENTIFICATION*

<b>Filing Period Name:</b>	Fall Pre-Primary 2012 Covers all activity from 07/01/2012 through 07/30/2012	<b>OFFICE USE ONLY</b>  GAB ID: 0105314
<b>Name of Committee/Corporation:</b>	SusanSommerSenate	
<b>Street Address:</b>	2674 Sunrise Circle	
<b>City, State and Zip:</b>	Phelps, WI 54554	

<i>SUMMARY OF RECEIPTS AND DISBURSEMENTS</i>	Column A This Period	Column B Calendar Year-To-Date
<b>1. RECEIPTS</b>		
1A. Contributions (Including Loans) from Individuals	\$370.00	\$4,540.00
1B. Contributions from Committees (Transfers-In)	\$0.00	\$0.00
1C. Other Income and Commercial Loans	\$0.00	\$0.00
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)	<b>\$370.00</b>	<b>\$4,540.00</b>
<b>2. DISBURSEMENTS</b>		
2A. Gross Expenditures	\$30.87	\$2,444.00
2B. Contributions to Committees (Transfers-Out)	\$0.00	\$0.00
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	<b>\$30.87</b>	<b>\$2,444.00</b>

*CASH SUMMARY*

Cash Balance Beginning of Report *	\$1,756.87
Total Receipts	\$370.00
Subtotal	\$2,126.87
Total Disbursements	\$30.87
<b>CASH BALANCE END OF REPORT *</b>	<b>\$2,096.00</b>
<b>INCURRED OBLIGATIONS</b>	
(Balance at the Close of This Period-3A)	\$1,412.00
<b>LOANS</b> (Balance at the Close of This Period-3B)	<b>\$0.00</b>

*\*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: Berner, Mary Jo	Signature of Candidate or Treasurer	Date: Daytime Phone:
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**NOTE:** The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

GAB-2 (Rev. 12/03) This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984, 608-266-8005.

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

Complete Committee Name: SusanSommerSenate

Date	Full Name	Address	Occupation	Employer Name	Employer Address	Amount	YTD
<b>Monetary</b>							
07/11/2012	HORSWILL, MERRILL	PO BOX 199, PRESQUE ISLE, WI 54557	RETIRED			\$50.00	\$0.00
07/11/2012	MILNE, ANN	PO BOX 176, PRESQUE ISLE, WI 54557	RETIRED			\$25.00	\$0.00
07/07/2012	Cheesman, Benbow	2501 South 60th Street, West Allis, WI 53219	RETIRED	Self	2501 South 60th Street, West Allis, WI 53219	\$25.00	\$0.00
07/13/2012	Melgar, JoAnn	1880 Wise Drive, Napa, CA 94558	STAFF ASSISTANT	County of Napa	1195 Third Street, Napa, CA 94558	\$100.00	\$0.00
07/14/2012	Leschke, James	340 North Baird Avenue, Rhinelander, WI 54501	SOCIAL WORKER	none	340 North Baird Avenue, Rhinelander, WI 54501	\$100.00	\$0.00
07/26/2012	Kennebeck, Helen	402 Shearwater Street, Madison, WI 53714	ATTORNEY	State of Wisconsin	3099 E. Washington Ave, Madison, WI 53707	\$50.00	\$0.00
07/11/2012	None, None	None, PRESQUE ISLE, WI 54557	NONE	None		\$20.00	\$0.00
	Comment(s): Unitemized under \$20						
<b>Sub Total</b>						\$370.00	
<b>Total Unitemized Contributions</b>						\$0.00	
<b>Total Anonymous Contributions</b>						\$0.00	
<b>Grand Total</b>						\$370.00	
<b>Non-Monetary (-):</b>						\$0.00	
<b>Loan Forgiven (-):</b>						\$0.00	
<b>Total</b>						\$370.00	

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

Complete Committee Name: SusanSommerSenate

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

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

Complete Committee Name: SusanSommerSenate

Date	Full Name	Address	Amount	YTD
Total			\$0.00	

**SCHEDULE 2-A****DISBURSEMENTS  
Gross Expenditures**

Complete Committee Name: SusanSommerSenate

Date	Full Name	Address	Vendor Name	Vendor Address	Expense Purpose	Amount
<b>Monetary</b>						
07/29/2012	ActBlue	14 Arrow Street, Suite 11, CAMBRIDGE, MA 02138		14 Arrow Street, Suite 11, CAMBRIDGE, MA 02138	ActBlue Fees	\$10.87
	Comment(s): ACTBLUE FEES					
07/30/2012	Berner, Mary Jo	142 Aquila Ct S., EAGLE RIVER, WI 54521		First National Bank of Eagle River, 400 E Wall St, EAGLE RIVER, WI 54521	Bank Charges	\$20.00
	Comment(s): BANK FEES					
<b>Sub Total</b>						\$30.87
<b>Grand Total</b>						\$30.87
<b>Non-Monetary (-):</b>						\$0.00
<b>Total</b>						\$30.87

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

Complete Committee Name: SusanSommerSenate

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

**SCHEDULE 3-A****ADDITIONAL DISCLOSURE**  
**Incurred Obligations Excluding Loans**

Complete Committee Name: SusanSommerSenate

Incurred Obligation Outstanding Amount: \$0.00

Date	Full Name	Address	Amount
<b>Incurred Obligation</b>			
07/15/2012	SOMMER	P.O. BOX 189, EAGLE RIVER, WI 54521	\$730.00
	Comment(s): MILEAGE		
07/28/2012	SOMMER	P.O. BOX 189, EAGLE RIVER, WI 54521	\$682.00
	Comment(s): MILEAGE		
<b>Sub Total</b>			\$1,412.00
<b>Grand Total</b>			\$1,412.00

Date	Full Name	Amount Paid
<b>Grand Total</b>		\$0.00

**SCHEDULE 3-B****ADDITIONAL DISCLOSURE**  
**Loans**  
**Individual, Committee or Commercial****Complete Committee Name:** SusanSommerSenate**Loans Outstanding Amount:** \$0.00

Date	Lender Name	Address	Loan Amount	Loan Payment + Forgiven Amount	Outstanding Amount
<b>Grand Total</b>					\$0.00