

**CAMPAIGN FINANCE REPORT
STATE OF WISCONSIN**

Is This Report an Amendment: Yes No

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

RECEIVED
11 JUL -6 PM 1:20
**GOVERNMENT
ACCOUNTABILITY BOARD**
OFFICE USE ONLY
GAB ID Number: 0105112

COMMITTEE IDENTIFICATION

Name of Committee: **Friends of John Buckstaff**
Street Address: **5838 I AH May Tan Rd**
City, State and Zip Code: **Oshkosh, WI 54901**

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
 July Continuing Pre-Election also complete Schedule 4

SUMMARY OF RECEIPTS AND DISBURSEMENTS

	Column A This Period	Column B Calendar Year-To-Date
1. RECEIPTS		
1A. Contributions (Including Loans) from Individuals	\$ —	\$
1B. Contributions from Committees (Transfers-In)	\$ 750	\$
1C. Other Income and Commercial Loans	\$ —	\$
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 750	\$
2. DISBURSEMENTS		
2A. Gross Expenditures	\$ 750	\$
2B. Contributions to Committees (Transfers-Out)	\$ —	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 750	\$

CASH SUMMARY

Cash Balance Beginning of Report	\$ 0
Total Receipts	\$ 750
Subtotal	\$ 750
Total Disbursements	\$ 750
CASH BALANCE END OF REPORT	\$ 0
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ 0
LOANS (Balance at the Close of This Period-3B)	\$ 0

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 JOHN D. BUCKSTAFF	Signature of Candidate or Treasurer <i>JDBuckstaff</i>	Date: 7/1/2011 Daytime Phone: 920-235-0930
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NOTE: The information on this form is required by ss.11.60, 11.61, Wis. Stats.
GAB-2S (Rev. 12/09)

Form prescrit
608-266-8005



Information may subject you to the penalties of
§ 7984, Madison, WI 53707-7984

SCHEDULE 1-B

RECEIPTS
Contributions from Committees
(Transfers-In)

Complete Committee Name

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

Date	Full Name of Committee, Mailing Address and Zip Code	Committee GAB ID Number	Amount of Contribution	Y-T-D Total
6/6/11	Republican Party of Wisconsin 148 E Johnson St. Madison, WI 53703 Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan	0300173	\$750 ⁰⁰	\$750
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan			
SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE			\$ 750	\$ 750
TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES			\$ 750	\$ 750

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name

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

Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
4/6/11	Republican Party of WI 148 E John St Madison, WI 53701 Check if: <input checked="" type="checkbox"/> In-Kind Offset	postage + printing	\$750
	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		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE			\$ 750
TOTAL ITEMIZED EXPENDITURES			\$
TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS			\$ —
TOTAL EXPENDITURES			\$ 750