

**CAMPAIGN FINANCE REPORT  
STATE OF WISCONSIN**

RECEIVED

Is This Report an Amendment:     Yes                       No

2012 AUG -7 AM 9:17

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

**COMMITTEE IDENTIFICATION**

GOVERNMENT  
ACCOUNTABILITY BOARD

Name of Committee

*Flejter For Assembly*

Street Address

*526 E FRANKLIN ST*

City, State and Zip Code

*WAUKESHA W, 53963*

GAB ID Number: *0105338*

OFFICE USE ONLY

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  
 July Continuing                       Pre-Election                       Termination Report  
also complete Schedule 4

**SUMMARY OF RECEIPTS AND DISBURSEMENTS**

	Column A This Period	Column B Calendar Year-To-Date
<b>1. RECEIPTS</b>		
1A. Contributions (Including Loans) from Individuals	\$ <i>271.<sup>00</sup></i>	\$ <i>1594.<sup>75</sup></i>
1B. Contributions from Committees (Transfers-In)	\$ <i>500.<sup>00</sup></i>	\$ <i>500.<sup>00</sup></i>
1C. Other Income and Commercial Loans	\$ <i>—</i>	\$ <i>—</i>
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)	\$ <i>771.<sup>00</sup></i>	\$ <i>2094.<sup>75</sup></i>
<b>2. DISBURSEMENTS</b>		
2A. Gross Expenditures	\$ <i>1838.<sup>11</sup></i>	\$ <i>1994.<sup>72</sup></i>
2B. Contributions to Committees (Transfers-Out)	\$ <i>—</i>	\$ <i>—</i>
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	\$ <i>1838.<sup>11</sup></i>	\$ <i>1994.<sup>72</sup></i>

**CASH SUMMARY**

Cash Balance Beginning of Report	\$ <i>1178.<sup>73</sup></i>
Total Receipts	\$ <i>771.<sup>00</sup></i>
Subtotal	\$ <i>1949.<sup>73</sup></i>
Total Disbursements	\$ <i>1838.<sup>11</sup></i>
<b>CASH BALANCE END OF REPORT</b>	\$ <i>111.<sup>62</sup></i>
<b>INCURRED OBLIGATIONS</b> (Balance at the Close of This Period-3A)	\$ <i>—</i>
<b>LOANS</b> (Balance at the Close of This Period-3B)	\$ <i>—</i>

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	Signature of Candidate or Treasurer	Date: <i>7-5-2012</i>
<i>Robert McLinn</i>	<i>Robert McLinn</i>	Daytime Phone: <i>920-324-5012</i>

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. ss.11.60, 11.61, Wis. Stats. GAB-2S (Rev. 12/09)

Form prescribed by the Government Accounting System Act 608-266-8005.



0105338-105

**RECEIPTS**  
**Contributions (Including Loans) From Individuals**

Complete Committee Name  
Flejter for Assembly

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
7/1/2012	TIFFANY Peterson N 9120 State Rd 26 Burnett WI 53922	Scale Operator	5 <sup>00</sup>	5 <sup>00</sup>
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit Conduit GABIDF			
7/1/2012	Keri Solis 118 Allen St Mayville WI 53058	UN Employed	5 <sup>00</sup>	5 <sup>00</sup>
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit Conduit GABIDF			
7/5/2012	BRAIN HARVEY 200 4th st Fond du Lac WI 54935	Front End Operations Spec	10 <sup>00</sup>	20 <sup>00</sup>
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit Conduit GABIDF			
7/21/2012	Michelle Hintz 346 Brookside #8 Mayville WI 53050	Visual Manager	5 <sup>00</sup>	10 <sup>00</sup>
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit Conduit GABIDF			
7/1/2012	Steve Thieda	Student	125 <sup>00</sup>	125 <sup>00</sup>
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit Conduit GABIDF			
7/29/2012	Jeffrey Worbestor 48 Fallingwood Terrace Rochester NY 14612	Field Organizer NY 25	25 <sup>00</sup>	25 <sup>00</sup>
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit Conduit GABIDF			
—	—	—	—	—
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit Conduit GABIDF			
<b>SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE</b>			\$ 150 <sup>00</sup>	175 <sup>00</sup>
<b>TOTAL ITEMIZED CONTRIBUTIONS</b>			\$ 210 <sup>00</sup>	260 <sup>00</sup>
<b>TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS</b>			\$ 61 <sup>00</sup>	31 <sup>00</sup>
<b>TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS</b>			\$ 271 <sup>00</sup>	291 <sup>00</sup>

**RECEIPTS**  
Contributions (Including Loans) From Individuals

Complete Committee Name  
Fleeter for Assembly

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
7/20/2012	JANE Spitz 1870 Emily Anne Dr Oshkosh WI 54904	social worker	\$ 15.00	\$ 25.00
	DAMONTE Reed Oshkosh WI 54901		\$ 5.00	\$ 5.00
	Ruth MADUKENSKI 1022 W 15 CONSUM ST OSHKOSH WI 54901	CAREGIVER	\$ 6.00	\$ 6.00
7/31/2012	FRANK MESA 931 Rock Ave WAUPUN WI 53963	Retired	\$ 10.00	\$ 10.00
	JEFF Voss Sr W 4430 S. Point Rd MAYVILLE WI 53050	Retired	\$ 30.00	\$ 30.00
	Michelle Voss W 4430 S. Point Rd MAYVILLE WI 53050	Nurse	30.00	30.00
<b>SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE</b>			\$ 60	\$ 85.00
<b>TOTAL ITEMIZED CONTRIBUTIONS</b>			\$	\$
<b>TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS</b>			\$	\$
<b>TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS</b>			\$	\$

**RECEIPTS**  
**Contributions from Committees**  
**(Transfers-In)**

Complete Committee Name  
Fleiter for Assembly

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
9/20/2012	WEAC Political Action Committee Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	0500189	500 <sup>00</sup>	500 <sup>00</sup>
	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			
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	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			
<b>SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE</b>			\$ 500 <sup>00</sup>	500 <sup>00</sup>
<b>TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES</b>			\$ 500 <sup>00</sup>	500 <sup>00</sup>

**DISBURSEMENTS**  
Gross Expenditures

Complete Committee Name  
Elector for Assembly

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
7/7/12	Local and Vocal Consulting Check if: <input type="checkbox"/> In-Kind Offset	consulting	250 <sup>00</sup>
7/7/12	Steve Thiede Check if: <input type="checkbox"/> In-Kind Offset	consulting	250 <sup>00</sup>
7/7/12	Jeff Wittkuban Check if: <input type="checkbox"/> In-Kind Offset	sign design	30 <sup>00</sup>
7/8/12	Citgo/Waupun Check if: <input type="checkbox"/> In-Kind Offset	GAS	50 <sup>00</sup>
7/10/12	DPW Check if: <input type="checkbox"/> In-Kind Offset	Voter File	500 <sup>00</sup>
7/10/12	Condon Oil Check if: <input type="checkbox"/> In-Kind Offset	GAS	22 <sup>02</sup>
7/24/12	My Campaign Store Check if: <input type="checkbox"/> In-Kind Offset	Signs	714 <sup>50</sup>
7/25/2012	<del>NATIONAL BANK OF WAUPUN</del> Check if: <input type="checkbox"/> In-Kind Offset	<del>over draft</del>	<del>10<sup>00</sup></del>

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 1838 <sup>11</sup>
TOTAL ITEMIZED EXPENDITURES	\$ 1838 <sup>11</sup>
TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS	\$
TOTAL EXPENDITURES	\$ 1838 <sup>11</sup>







# CAMPAIGN FINANCE CHECKLIST CANDIDATE COMMITTEES

## FALL ELECTION CAMPAIGN FINANCE REPORTS



Campaign Finance Reports may be submitted to the Government Accountability Board, Ethics and Accountability Division electronically (<http://cfis.wi.gov>), by mail (P.O. Box 7984, Madison, WI 53707-7984), or in person (212 E. Washington Avenue, 3<sup>rd</sup> Floor, Madison, WI).

### If not eligible for exemption from reporting requirements:

- Complete and submit a **July Continuing 2012 Campaign Finance Report (Form GAB-2S)** to the Ethics and Accountability Division no later than **July 20, 2012**. This report covers activity from January 1, 2012 or the date of your last report, through June 30, 2012.
- Complete and submit a **Fall Pre-Primary Campaign Finance Report (Form GAB-2S)** to the Ethics and Accountability Division no later than **August 6, 2012**. This report covers activity from July 1, 2012, through July 30, 2012.
- Complete and submit a **Special Report of Late Contribution (Form GAB-3)** to the Ethics and Accountability Division within 24 hours of receiving a contribution of \$500 or more, and contributions from a single source totaling in aggregate \$500 or more from July 31, 2012, through August 14, 2012.
- Complete and submit a **Fall Pre-Election Campaign Finance Report (Form GAB-2S)** to the Ethics and Accountability Division no later than **October 29, 2012**. This report covers activity from July 31, 2012, or the date of your last report, through October 22, 2012.
- Complete and submit a **Special Report of Late Contribution (Form GAB-3)** to the Ethics and Accountability Division within 24 hours of receiving a contribution of \$500 or more, and contributions from a single source totaling in aggregate \$500 or more from October 23, 2012, through November 6, 2012.
- Complete and submit a **January Continuing 2013 Campaign Finance Report (Form GAB-2S)** to the Ethics and Accountability Division no later than **January 31, 2013**. This report covers activity from October 23, 2012, or the date of your last report, through December 31, 2012.

For further information or to obtain any of the necessary forms, please contact:

Government Accountability Board  
212 East Washington Avenue, 3<sup>rd</sup> Floor  
P.O. Box 7984  
Madison, WI 53707-7984  
608-266-8005 <http://gab.wi.gov> Email: [gab@wi.gov](mailto:gab@wi.gov)