

**CAMPAIGN FINANCE REPORT  
LOCAL COMMITTEES OF WISCONSIN**



Is This Report an Amendment:  Yes  No

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

**COMMITTEE IDENTIFICATION**

Name of Committee  
*Friends of Casey Hicks*

Street Address  
*1332 Angels Path Apt. 28*

City, State and Zip Code  
*De Pere, WI, 54115*

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

**NAME OF REPORT**

January Continuing *2018*  Pre-Primary \_\_\_\_\_

July Continuing \_\_\_\_\_  Spring  Fall  Special

September 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>440.00</i>	\$
1B. Contributions from Committees (Transfers-In)	\$ <i>405.00</i>	\$
1C. Other Income and Commercial Loans	\$	\$
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)	\$ <i>840.00</i>	\$
<b>2. DISBURSEMENTS</b>		
2A. Gross Expenditures	\$ <del><i>986.7</i></del> <i>115.66</i>	\$
2B. Contributions to Committees (Transfers-Out)	\$	\$
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	\$ <del><i>986.7</i></del> <i>115.66</i>	\$

**CASH SUMMARY**

Cash Balance Beginning of Report	\$ <i>0.00</i>
Total Receipts	\$ <i>840.00</i>
Subtotal	\$ <i>98.67</i>
Total Disbursements	\$ <i>74.33</i>
<b>CASH BALANCE END OF REPORT</b>	\$
<b>INCURRED OBLIGATIONS</b> (Balance at the Close of This Period-3A)	\$
<b>LOANS</b> (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 <i>Don Wertiska</i>	Signature of Candidate or Treasurer <i>[Signature]</i>	Date: <i>1-31-18</i>
	Email <i>donwertiska@outlook.net</i>	Daytime Phone: <i>920-412-2118</i>

NOTE: The information on this form is required by ss. 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.

**Contributions (Including Loans) From Individuals**

Complete Committee Name  
Friends of Casey Hicks

Instructions for completing schedules are on the back of each schedule

Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation (if year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
12/6/17	Casey L. Hicks 1332 Angels Path Apt. 28 De Pere, WI, 54115 Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		10.00	10.00
12/6/17	Brenna Foley 233 E. Whitney St. Green Bay, WI, 54301 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		20.00	20.00
12/7/17	Jake Mackenrode 425 N. Dries St. Scalesville, WI, 53080 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		50.00	50.00
12/11/17	Megan M. Ryan 1332 Angels Path Apt. 28 De Pere, WI, 54115 Check if: <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		35.00	35.00
12/11/17	Tanner Shepherd 326 S. Kackett Ave Milwaukee, WI, 53211 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		25.00	25.00
12/12/17	Lauren Erdocke 257 E River Dr. Apt. 3 De Pere, WI 54115 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		50.00	50.00
12/12/17	Emily Clutter 4049 Fox Hills Dr. Rodeford, IL 61101 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		20.00	20.00

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 210.00      210.00

TOTAL ITEMIZED CONTRIBUTIONS

\$ 440.00      440.00

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$ 30.00      30.00

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ 440.00      440.00

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

Complete Committee Name  
Friends of Casey Hidas

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

Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation (if year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
12/8/17	Jonathan M. Hansen 624 S. Eric St. Apt 12 De Pere, WI 54115 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		25.00	25.00
12/14/17	Tanner Klein N2953 Hwy 57 Waldo, WI 53093 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		25.00	25.00
12/16/17	Kyle Schneider 2429 Sycamore Dr. Apt. 6 Green Bay, WI 54311 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		10.00	10.00
12/17/17	Samuel Birnbaum 525 Fremont St. Random Lake, WI 53075 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		10.00	10.00
12/20/17	Jon Shelton 1019 Emilie St. Green Bay, WI 54301 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		75.00	75.00
12/21/17	Cristina Sullivan-Metclor 3067 Nicolet Dr. Green Bay, WI 54311 Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		10.00	20.00
12/21/17	Cristina Sullivan-Metclor 3067 Nicolet Dr. Green Bay, WI 54311 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		10.00	20.00

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 165.00	165.00
TOTAL ITEMIZED CONTRIBUTIONS	\$ 440.00	440.00
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$ 30.00	30.00
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$ 440.00	440.00

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

Complete Committee Name \_\_\_\_\_

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

Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation (if year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
12/12/17	Harrison Pham 257 E. River Dr. De Pere, WI 54304 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		15.00	15.00
12/30/17	Sham Shaldeen 540 S. Main St. Naperville, IL 60540 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		50.00	50.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 65.00	65.00
TOTAL ITEMIZED CONTRIBUTIONS	\$ 440.00	440.00
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$ 30.00	30.00
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$ 440.00	440.00

**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	Amount of Contribution
12/18/17	Rec: f For Assembly 1450 Colvin Dr. P.O. Box 9131 Green Bay, WI 54511 Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan	400.00
	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		\$ 400.00
TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES		\$ 400.00

**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
12/11/17	Target 2050 Lime W:ln Rd. Green Bay, WI 54311 Check if: <input checked="" type="checkbox"/> In-Kind Offset	Printer Ink	38.99
12/11/17	Formstate 8202 Washington St. STE 11 Downers Grove, IL 60515 Check if: <input checked="" type="checkbox"/> In-Kind Offset	Donation Form	24.95
12/29/17	Visteprint 275 Wyman St. Waltham, MA 02451 Check if: <input checked="" type="checkbox"/> In-Kind Offset	Business Cards	29.97
12/21/17	Cristin Sullivan-Metzler 3067 N. Cedar Dr Green Bay, WI 54304 Check if: <input checked="" type="checkbox"/> In-Kind Offset		10.00
12/17	Pay Pal 2211 N. First St. San Jose, CA 95131 Check if: <input checked="" type="checkbox"/> In-Kind Offset	Paypal fees for December	12.75
	Check if: <input checked="" type="checkbox"/> In-Kind Offset		
	Check if: <input checked="" type="checkbox"/> In-Kind Offset		
	Check if: <input checked="" type="checkbox"/> In-Kind Offset		

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 115.66 <del>108.67</del>
TOTAL ITEMIZED EXPENDITURES	\$ 115.66 <del>108.67</del>
TOTAL UNITEMIZED EXPENDITURES	\$ 12.75
TOTAL EXPENDITURES	\$ 115.66 <del>108.67</del>

**Campaign Finance Report**

Short Form ETHCF-2a

Ethics ID Number

Spring  Fall  Special  Pre-Primary \_\_\_\_\_  Continuing Report due Jan. 15, X 2018  
 Spring  Fall  Special  Pre-Election \_\_\_\_\_  Continuing Report due July 15, \_\_\_\_\_  
 Continuing Report due 4<sup>th</sup> Tues Sept., \_\_\_\_\_

Name of Candidate or Committee (in full) Friends of CAROL Kelso  
 Address 11320 W CRESTVIEW DR Fountain Hills, AZ  
 Daytime Phone 480-584-3678

I certify that the above named committee or candidate did not receive contributions or other income, make disbursements, or incur obligations during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills filing requirements under Sec. 11.0103(3)(d), Stats.

Signature of Committee Treasurer or Candidate Carol Kelso Date 1/24/2018 Email Address TOFWITEDDY@cox.net

ETHCF-2a | Rev 01/2016 | Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 |  
 Phone: 608-261-2028 | Fax: 608-264-9319 | Web: <https://efis.wi.gov> | Email: [GABCFIS@wi.gov](mailto:GABCFIS@wi.gov)





**Campaign Finance Report**  
Short Form ETHCF-2a

Ethics ID Number

Spring  Fall  Special    Pre-Primary   Continuing Report due Jan. 15,   
 Spring  Fall  Special    Pre-Election   Continuing Report due July 15, \_\_\_\_\_  
 Continuing Report due 4<sup>th</sup> Tues Sept., \_\_\_\_\_

Name of Candidate or Committee (in full) William Joseph Peters, Jr.

Address 233 N. Ashland Ave., Green Bay, WI 54303

Daytime Phone 920-461-2847

I certify that the above named committee or candidate did not receive contributions or other income, make disbursements, or incur obligations during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills filing requirements under Sec. 11.0103(3)(d), Stats.

Signature of Committee Treasurer or Candidate	Date	Email Address
	<u>1/26/2018</u>	<u>Williamjosephjr@richard.com</u>

ETHCF-2a | Rev 01/2016 | Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984  
 Phone: 608-261-2028 | Fax: 608-264-9319 | Web: <https://cfis.wi.gov> | Email: [GABCFIS@wi.gov](mailto:GABCFIS@wi.gov)