

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

Rec'd 7/20/16 hak

Is This Report an Amendment: Yes No

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

COMMITTEE IDENTIFICATION

Name of Committee

Thomas DeWane

Street Address

2535 Delwood Dr

City, State and Zip Code

Green Bay WI 54302

OFFICE USE ONLY

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 _____ Pre-Primary _____
 July Continuing _____ Spring Fall Special Termination Report
 September 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	\$ 200.00	\$ 200.00
1B. Contributions from Committees (Transfers-In)	\$ _____	\$ _____
1C. Other Income and Commercial Loans	\$ _____	\$ _____
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 200.00	\$ 200.00
2. DISBURSEMENTS		
2A. Gross Expenditures	\$ 1627.84	\$ 1627.84
2B. Contributions to Committees (Transfers-Out)	\$ _____	\$ _____
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 1627.84	\$ 1627.84

CASH SUMMARY

Cash Balance Beginning of Report	\$ 2701.17
Total Receipts	\$ 200.00
Subtotal	\$ 2901.17
Total Disbursements	\$ 1627.84
CASH BALANCE END OF REPORT	\$ 1273.33
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ _____
LOANS (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 Thomas DeWane	Signature of Candidate or Treasurer <i>Thomas DeWane</i>	Date: 7-20-16
	Email	Daytime Phone: 4657803

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.

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
4-1-16	Prime time Printing w. mason Check if: <input type="checkbox"/> In-Kind Offset	Tom Dewane for Alderman Printing	403.99
4-25-16	mail Haus De pere Check if: <input type="checkbox"/> In-Kind Offset	Tom Dewane for Alderman for Mailers	1023.85
4-15-16	nicole Dewane Check if: <input type="checkbox"/> In-Kind Offset	helper with Flyers	200.00
	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	\$ 1627.84
TOTAL ITEMIZED EXPENDITURES	\$ -
TOTAL UNITEMIZED EXPENDITURES	\$ -
TOTAL EXPENDITURES	\$ 1627.84

Complete Committee Name
Tom DeWane

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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
4-15	<i>Tom DeWane</i>	<i>Alderman</i>	<i>209.00</i>	<i>209.00</i>
	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# _____			
	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

\$ *209.00*

TOTAL ITEMIZED CONTRIBUTIONS

\$

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$