

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

*feed 3/28/16
kat*

Is This Report an Amendment: Yes No

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

COMMITTEE IDENTIFICATION

Name of Committee

Melinda Eck

Street Address

1634 Birchwood Drive

City, State and Zip Code

Green Bay, WI 54304

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 Spring Fall Special
 July Continuing Pre-Election Spring Fall Special

Termination Report
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	\$ 463.30	\$ 1661.89
1B. Contributions from Committees (Transfers-In)	\$ 0	\$ 0
1C. Other Income and Commercial Loans	\$ 0	\$ 0
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 463.30	\$ 1661.89
2. DISBURSEMENTS		
2A. Gross Expenditures	\$ 463.30	\$ 1661.89
2B. Contributions to Committees (Transfers-Out)	\$ 0	\$ 0
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 463.30	\$ 1661.89

CASH SUMMARY

Cash Balance Beginning of Report	\$ 0
Total Receipts	\$ 463.30
Subtotal	\$ 463.30
Total Disbursements	\$ 463.30
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)	\$ 1,421.89

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: 03/28/2016
Melinda M. Eck	<i>Melinda M. Eck</i>	Daytime Phone: (920) 621-9827
	Email melindaeck@gmail.com	

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.

SCHEDULE 1-B

RECEIPTS

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

Complete Committee Name
Melinda Eck

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

Date / /	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	Check if: In-Kind Loan <input type="checkbox"/> <input type="checkbox"/>		
	Full Name of Committee, Mailing Address and Zip Code Check if: In-Kind Loan <input type="checkbox"/> <input type="checkbox"/>		
	Full Name of Committee, Mailing Address and Zip Code Check if: In-Kind Loan <input type="checkbox"/> <input type="checkbox"/>		
	Full Name of Committee, Mailing Address and Zip Code Check if: In-Kind Loan <input type="checkbox"/> <input type="checkbox"/>		
	Full Name of Committee, Mailing Address and Zip Code Check if: In-Kind Loan <input type="checkbox"/> <input type="checkbox"/>		
	Full Name of Committee, Mailing Address and Zip Code Check if: In-Kind Loan <input type="checkbox"/> <input type="checkbox"/>		
	Full Name of Committee, Mailing Address and Zip Code Check if: In-Kind Loan <input type="checkbox"/> <input type="checkbox"/>		
	Full Name of Committee, Mailing Address and Zip Code Check if: In-Kind Loan <input type="checkbox"/> <input type="checkbox"/>		
	Full Name of Committee, Mailing Address and Zip Code Check if: In-Kind Loan <input type="checkbox"/> <input type="checkbox"/>		
	Full Name of Committee, Mailing Address and Zip Code Check if: In-Kind Loan <input type="checkbox"/> <input type="checkbox"/>		
	Full Name of Committee, Mailing Address and Zip Code Check if: In-Kind Loan <input type="checkbox"/> <input type="checkbox"/>		
	Full Name of Committee, Mailing Address and Zip Code Check if: In-Kind Loan <input type="checkbox"/> <input type="checkbox"/>		
	Full Name of Committee, Mailing Address and Zip Code Check if: In-Kind Loan <input type="checkbox"/> <input type="checkbox"/>		
	Full Name of Committee, Mailing Address and Zip Code Check if: In-Kind Loan <input type="checkbox"/> <input type="checkbox"/>		
	Full Name of Committee, Mailing Address and Zip Code Check if: In-Kind Loan <input type="checkbox"/> <input type="checkbox"/>		
	Full Name of Committee, Mailing Address and Zip Code Check if: In-Kind Loan <input type="checkbox"/> <input type="checkbox"/>		

N/A

SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE \$

TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES \$ *0*

DISBURSEMENTS

Gross Expenditures

Complete Committee Name:
Melinda ECK

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
/ /	Digi-copy Check if: <input type="checkbox"/> In-Kind Offset	Flyers	307.13
/ /	Facebook Check if: <input type="checkbox"/> In-Kind Offset	Advertisement	40
/ /	Mailer list Check if: <input type="checkbox"/> In-Kind Offset	Registered voter list	40
/ /	Godaddy.com Check if: <input type="checkbox"/> In-Kind Offset	web domain	1.17
/ /	Melinda ECK Check if: <input type="checkbox"/> In-Kind Offset	Repay loan	75.00
/ /	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		

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$	463.30
TOTAL ITEMIZED EXPENDITURES	\$	
TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS	\$	
TOTAL EXPENDITURES	\$	463.30

**Contributions To Committees
(Transfers-Out)**

Complete Committee Name
Melinda Eck

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

Date / /	Full Name, Mailing Address and Zip Code Check if: In-Kind <input type="checkbox"/> Loan <input type="checkbox"/>	Amount	Calendar Year-To-Date Total
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE		\$	
TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES		\$	<i>0</i>

ADDITIONAL DISCLOSURE
Incurred Obligations Excluding Loans

Complete Committee Name
Melinda Eck

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

		Outstanding Balance Beginning This Period	New Obligations or Additions This Period	Cumulative Payments This Period	Outstanding Balance At Close of This Period
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			

SUBTOTAL ITEMIZED OBLIGATIONS THIS PAGE \$
 TOTAL ITEMIZED OBLIGATIONS \$
 TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS \$
 TOTAL INCURRED OBLIGATIONS \$

\$
 \$
 \$
 \$

[Signature]

**Loans
Individual, Committee or Commercial**

Complete Committee Name
Melinda Eck

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

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Balance Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Balance End of This Period
<u>2/5/16</u>	<u>Melinda Eck</u>	<u>1,108.59</u>	<u>388.30</u>	<u>75.00</u>	<u>1,421.89</u>

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Name and Address of Employer
	Amount Guaranteed Outstanding \$

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Name and Address of Employer
	Amount Guaranteed Outstanding \$

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Balance Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Balance End of This Period
/ /					

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Name and Address of Employer
	Amount Guaranteed Outstanding \$

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Name and Address of Employer
	Amount Guaranteed Outstanding \$

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Balance Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Balance End of This Period
/ /					

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Name and Address of Employer
	Amount Guaranteed Outstanding \$

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Name and Address of Employer
	Amount Guaranteed Outstanding \$

SUBTOTAL OUTSTANDING LOANS THIS PAGE	\$ <u>1,496.89</u>
TOTAL OUTSTANDING LOANS	\$ <u>1,496.89</u>