

**CAMPAIGN FINANCE REPORT  
LOCAL COMMITTEES OF WISCONSIN**

Rec'd 1/7/16  
kat

Is This Report an Amendment:     Yes         No

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

**COMMITTEE IDENTIFICATION**

Name of Committee

Rhonda Stritkav

Street Address

1122 S. Jackson

City, State and Zip Code

Green Bay, WI 54301

**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 2016     Pre-Primary \_\_\_\_\_  
 July Continuing \_\_\_\_\_     Spring     Fall     Special  
 September Continuing \_\_\_\_\_     Pre-Election \_\_\_\_\_

Termination Report  
also complete Schedule 4

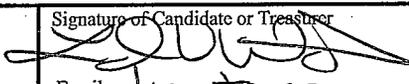
**SUMMARY OF RECEIPTS AND DISBURSEMENTS**

	Column A This Period	Column B Calendar Year-To-Date
<b>1. RECEIPTS</b>		
1A. Contributions (Including Loans) from Individuals	\$ 200.00	\$ 200.00
1B. Contributions from Committees (Transfers-In)	\$ 0	\$ 0
1C. Other Income and Commercial Loans	\$ 0	\$ 0
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)	\$ 200.00	\$ 200.00
<b>2. DISBURSEMENTS</b>		
2A. Gross Expenditures	\$ 15.75	\$ 15.75
2B. Contributions to Committees (Transfers-Out)	\$ 0	\$ 0
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	\$ 15.75	\$ 15.75

**CASH SUMMARY**

Cash Balance Beginning of Report	\$ 0
Total Receipts	\$ 200.00
Subtotal	\$ 200.00
Total Disbursements	\$ 15.75
<b>CASH BALANCE END OF REPORT</b>	\$ 184.25
<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	Signature of Candidate or Treasurer	Date:
Laural V Walters		1/7/16
	Email	Daytime Phone:
	lwalters@new-rr.com	920-544047

**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.

Complete Committee Name  
Rhonda Sitnikav

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
	<u>Rhonda Sitnikav</u> <u>1122 S. Jackson</u> <u>Green Bay, WI 54302</u> Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		\$100.	\$100.00
	<u>Jay Erbeck</u> <u>1125 S. Jackson</u> <u>Green Bay, WI 54301</u> Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		\$100.	\$100.00
	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# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
<b>SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE</b>			\$ 200.00	200.00
<b>TOTAL ITEMIZED CONTRIBUTIONS</b>			\$ 200.00	200.00
<b>TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS</b>			\$ —	—
<b>TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS</b>			\$ 200.00	200.00

**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	Committee Ethics ID Number	Amount of Contribution
	N/A		
	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		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
<b>SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE</b>			\$
<b>TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES</b>			\$



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
	Associated Bank 200 N Adams Green Bay WI 54301 Check if: <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Offset	Cost of Checks	\$ 15.75
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Offset		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Offset		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Offset		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Offset		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Offset		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Offset		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Offset		

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 15.75
TOTAL ITEMIZED EXPENDITURES	\$ 15.75
TOTAL UNITEMIZED EXPENDITURES	\$ —
TOTAL EXPENDITURES	\$ 15.75

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

Complete Committee Name

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

Date	Full Name, Mailing Address and Zip Code	Committee Ethics ID Number	Amount	Y-T-D Total
	N/A			
	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			
<b>SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE</b>			\$	
<b>TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES</b>			\$	

Complete Committee Name

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  <i>DHA</i>				
		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)			
<b>SUBTOTAL ITEMIZED OBLIGATIONS THIS PAGE</b>					\$
<b>TOTAL ITEMIZED OBLIGATIONS</b>					\$
<b>TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS</b>					\$
<b>TOTAL INCURRED OBLIGATIONS</b>					\$

**Loans  
Individual, Committee or Commercial  
ADDITIONAL DISCLOSURE**

Complete Committee Name

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

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

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor  <b>N/A</b>	Occupation
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

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

List All Endorsers or Guarantors (if any)

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

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

List All Endorsers or Guarantors (if any)

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

**SUBTOTAL OUTSTANDING LOANS THIS PAGE**

\$

**TOTAL OUTSTANDING LOANS**

\$