

**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

Tierney for Common Council

Street Address

4534 Secret Garden Dr

City, State and Zip Code

McFarland WI 53558

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 2019 Pre-Primary _____
 July Continuing _____ Spring Fall Special
 September Continuing _____ Pre-Election _____
- Termination Report
also complete Schedule 4

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

	Column A This Period	Column B Calendar Year-To-Date
1A. Contributions (Including Loans) from Individuals	\$ 100 ⁰⁰	\$ 100 ⁰⁰
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)	\$ 100 ⁰⁰	\$ 100 ⁰⁰

2. DISBURSEMENTS

2A. Gross Expenditures	\$ 58 ⁰⁰	\$ 58 ⁰⁰
2B. Contributions to Committees (Transfers-Out)	\$ 0	\$ 0
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 58 ⁰⁰	\$ 58 ⁰⁰

CASH SUMMARY

Cash Balance Beginning of Report	\$ 0
Total Receipts	\$ 100 ⁰⁰
Subtotal	\$ 100 ⁰⁰
Total Disbursements	\$ 58 ⁰⁰
CASH BALANCE END OF REPORT	\$ 42 ⁰⁰
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ 0
LOANS (Balance at the Close of This Period-3B)	\$ 0

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: 1/17/2019
Michael J Tierney	Michael J Tierney	
	Email: mjtierney1965@gmail.com	Daytime Phone: 608-443-8239

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 _____

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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
12/18/18	Shawn Pfaff 5843 Schumann Dr Fitchburg WI 53711 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		100 ⁰⁰	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# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 100

TOTAL ITEMIZED CONTRIBUTIONS

\$ 100

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$ 0

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ 100

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name

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Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
12/21/18	Union Labor News 1602 S. Park St Madison WI 53715 Check if: <input type="checkbox"/> In-Kind Offset	Advertising	40 ⁰⁰
12/26/18	UW Credit Union PO Box 44963 Madison WI 53744-4463 Check if: <input type="checkbox"/> In-Kind Offset	Check Fees	18 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		
	Check if: <input type="checkbox"/> In-Kind Offset		

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE \$ 58⁰⁰

TOTAL ITEMIZED EXPENDITURES \$ 58⁰⁰

TOTAL UNITEMIZED EXPENDITURES \$ 0

TOTAL EXPENDITURES \$ 58⁰⁰