

**CAMPAIGN FINANCE REPORT
STATE OF WISCONSIN**

Is This Report an Amendment: Yes No

RECEIVED-CITY OF MADISON
CLERKS OFFICE

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

02 JUL 26 PM 12:51

COMMITTEE IDENTIFICATION

Name of Committee

FRIENDS FOR FROMAGER

Street Address

152 S. HANCOCK ST.

City, State and Zip Code

MADISON WI 53703

OFFICE USE ONLY

WSEB ID Number:

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 20__ Pre-Primary 20__ Spring Fall Special
- July Continuing 2002 Pre-Election 20__ Spring Fall Special

Termination Report
also complete Schedule 4

**SUMMARY OF RECEIPTS AND
DISBURSEMENTS**

1. RECEIPTS

	Column A This Period	Column B Calendar Year-To-Date	Audited Totals Office Use Only	
A. Contributions including Loans from Individuals	\$ 2695	\$ 6525	\$	\$
B. Contributions from Committees (Transfers-In)	\$	\$	\$	\$
C. Other Income and Commercial Loans	\$	\$	\$	\$
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 2695	\$ 6525	\$	\$

2. DISBURSEMENTS

A. Gross Expenditures	\$ 4174.32	\$ 5294.28	\$	\$
B. Contributions to Committees (Transfers-Out)	\$	\$	\$	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 4174.32	\$ 5294.28	\$	\$

CASH SUMMARY

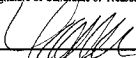
Cash Balance Beginning of Report	\$ 2710.04	\$
Total Receipts	\$ 2695.00	\$
Subtotal	\$ 5405.04	\$
Total Disbursements	\$ 4174.32	\$
CASH BALANCE END OF REPORT	\$ 1230.72	\$
INCURRED OBLIGATIONS	\$	\$
(Balance at the Close of This Period)		\$
LOANS (Balance at the Close of This Period)	\$	\$

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

JOE METNER

Signature of Candidate or Treasurer



Date:

7/30/02

Daytime Phone:

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.

Contributions Including Loans From Individuals

Complete Committee Name

FRANKIE FOR KUMADEI

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

Date	Full Name, Mailing Address and ZIP Code	Occupation, Name and Address of Principal Place Of Employment (If contribution exceeds \$100)	Amount	Calendar Year to Date Total
3/1/02	TOM PAGATE 3334 LAKE MELWOODA MADISON, WI 53705	RETIRED	\$ 200.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/24/02	DOUGLAS KUTZKE 5420 KUAMME LN. MADISON, WI 53716		\$ 50.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/22/02	WILLIAM J. MCCORMACK 2780 CASSIDY CT. MADISON, WI 53711	PRINCIPAL CAPITOL CONSULTANTS 16 S. CANAOL ST. MADISON, WI 53703	200.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/22/02	DONNA VAN BOSGART 5910 LESINGTON ST. MC KANLAD, WI 53558		\$ 25.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/23/02	JOYCE FINUCAN 23450 CRY HWY N KENDALL, WI 54638		25.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/23/02	RICHARD R. MEYER 4110 MEYER AVE. MADISON, WI 53711		20.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/23/02	RICHARD LEPPING 1634 SHERMAN AVE MADISON, WI 53704		50.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/27/02	NATE ELIAS		\$ 50.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE			\$ 620	
TOTAL ITEMIZED CONTRIBUTIONS			\$	
TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS			\$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS			\$	

Contributions Including Loans From Individuals

Complete Committee Name

FRIENDS FOR FROMASER

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

Date	Full Name, Mailing Address and ZIP Code	Occupation, Name and Address of Principal Place Of Employment (If contribution exceeds \$100)	Amount	Calendar Year to Date Total
3/27/02	LARRY AMBROSE 2426 WILD FLOWER LA STOUGHTON, WI 53708		\$ 25 ⁰⁰	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/27/02	BILL ESBECK 371 WOODLAND C/A. MADISON, WI 53704		\$ 20 ⁰⁰	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/28/02	STEPHEN ZANONI 138 LARKIN ST. MADISON, WI 53705		\$ 50 ⁰⁰	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
5/28/02	CHRIS TACKETT RT. 8, 1694 Hwy PB VERONA, WI 53593	PRESIDENT WISCONSIN MERCHANTS FEDERATION 1 E. MAIN ST. MADISON WI 53703	\$ 250 ⁰⁰	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
2/28/02	KAY LINDBLADE 1542 COMANCHE C/A MADISON, WI 53704		\$ 25 ⁰⁰	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
5/28/02	DEAN STEINBERG 7303 UNIVERSITY AVE MIDDLETON, WI 53562		\$ 25 ⁰⁰	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/28/02	CHRIS LA ROWE 10 CORONA CT. MADISON WI 53719		\$ 25 ⁰⁰	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/28/02	PETER KAMMER 2913 MONROE ST. #2 MADISON, WI 53711		\$ 50 ⁰⁰	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE			\$ 470	
TOTAL ITEMIZED CONTRIBUTIONS			\$	
TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS			\$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS			\$	

Contributions Including Loans From Individuals

Complete Committee Name

FRIENDS FOR FROMADER

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

Date	Full Name, Mailing Address and ZIP Code	Occupation, Name and Address of Principal Place Of Employment (If contribution exceeds \$100)	Amount	Calendar Year to Date Total
5/28/02	JOE TRACONING 3122 GRANDVIEW BLVD MADISON, WI 53713		50.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/28/02	KRIS ANDREWS 3618 SPRING TRL MADISON, WI 53711		75.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/28/02	BILL GERRARD 420 S. 5TH ST. LA CROSSE, WI 54601	GERARD REALTY 420 S. 5TH ST. LA CROSSE, WI 54601	200.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/28/02	NOTKONG SRISPAK 621 N. SHERMAN AVE. MADISON WI 53704		25.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/28/02	KATHARINE HILDEBRALB 44 WAUNONA WOODS ST. MADISON WI 53713		25.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/28/02	TOMMI THOMPSON 1313 MADRASIA TR. MADISON WI 53718		25.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/28/02	ANUKITE CRUZ 2952 ZWALHOE CEN MADISON WI 53711		25.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/28/02	Joy NEWMAN 5513 COMANCHE WAY MADISON WI 53704		25.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE			\$ 450	
TOTAL ITEMIZED CONTRIBUTIONS			\$	
TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS			\$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS			\$	

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	Occupation, Name and Address of Principal Place Of Employment (If contribution exceeds \$100)	Amount	Calendar Year to Date Total
3/29/02	BILL REID 23 PELICAN CIR. MADISON, WI 53716		25.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/29/02	SHIVA SATHASIVAM P.O. BOX 2744 MADISON, WI 53701		25.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/29/02	ROBERT COOK 9 S. STATHFIELD CIR. MADISON, WI 53717		25.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/29/02	LARRY AMBROSE 2426 WILD FLOWER RD STOUGHTON, WI 53589		25.00	50.00 Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/29/02	STEWART SIMONSON 2039 NEW HANSHUR AVENUE WASHINGTON, DC 20009		25.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/29/02	TIMOTHY BUNL 767 MILLBROOK DR. MCKEAN, WI 54856		25.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/29/02	KRISTA GILKER-CROSHAM 2202 CENTER AVE. MADISON WI 53704		25.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/29/02	JULIE WHITEHOUSE 4910 KALM CIR. MADISON, WI 53714		25.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE			\$ 200	
TOTAL ITEMIZED CONTRIBUTIONS			\$	
TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS			\$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS			\$	

Contributions Including Loans From Individuals

Complete Committee Name
FRIENDS FOR FARMWORK

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

Date	Full Name, Mailing Address and ZIP Code	Occupation, Name and Address of Principal Place Of Employment (If contribution exceeds \$100)	Amount	Calendar Year to Date Total
3, 29, 02	SUE ANN THOMPSON 1313 MANASSAS TR MADISON, WI 53718		75.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3, 29, 02	D. J. KLAUSER 112 FRECHLAND PL. MADISON, WI 53714		40.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3, 29, 02	JASON T. THOMPSON 1313 MANASSAS TR. MADISON, WI 53718		50.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3, 29, 02	SUSAN PERA 1218 LORUTH TERR MADISON WI 53711		50.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3, 29, 02	PAT GOSS 1618 ANGEL CRESTWAY MADISON, WI 53716		50.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3, 29, 02	SCOTT SMITH 5710 CALD AVE. McFARLAND, WI 53058		50.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3, 29, 02	DR. KENNETH LUBSTKE 6002 S. HILL DR. MADISON, WI 53705	LUBSTKE CHROMATIC 2702 MONROE ST. MADISON WI 53711	200.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3, 29, 02	MARY PAUL LONG 813 SOUTH SHORE DR. MADISON WI 53715		50.00	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 515

TOTAL ITEMIZED CONTRIBUTIONS

\$

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS

\$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$

Contributions Including Loans From Individuals

Complete Committee Name

FRIENDS FOR FROMADER

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

Date	Full Name, Mailing Address and ZIP Code	Occupation, Name and Address of Principal Place Of Employment (If contribution exceeds \$100)	Amount	Calendar Year to Date Total
3/29/02	MICHAEL HENNESSEY 2409 MCKELLA BLVD MADISON, WI 53711		75 ⁰⁰	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/31/02	TOMMY G. THOMPSON 1313 WIAWASSA ST MADISON WI 53718		100 ⁰⁰	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/31/02	DONNA J. SAROL 309 B. N. BLOUNT ST MADISON WI 53703		25 ⁰⁰	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/31/02	RICHARD FIVE 1221 PRINTERS POST RD MADISON WI 53716		50 ⁰⁰	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/31/02	DON HENDRICKSON 520 UNIVERSITY AVE MADISON WI 53703		40 ⁰⁰	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/31/02	DAVE STARK 6 TRULE CIR MADISON WI 53717		40 ⁰⁰	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
3/31/02	RON STEINHOFFER 579 KELVINGTON #1 SUN PRAIRIE WI 53590		40 ⁰⁰	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
1/1	J. MICHAEL BLASKA 5972 COUNTY RD MARSHALL, WI 53559		40 ⁰⁰	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE			\$ 410	
TOTAL ITEMIZED CONTRIBUTIONS			\$	
TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS			\$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS			\$	

Contributions Including Loans From Individuals

Complete Committee Name

FRANKS FOR FROMAGE

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

Date	Full Name, Mailing Address and ZIP Code	Occupation, Name and Address of Principal Place Of Employment (If contribution exceeds \$100)	Amount	Calendar Year to Date Total
8/21/02	ALICE O'CONNOR 1240 SHERMAN AVE. MADISON WI 53702		\$ 30 ⁰⁰	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			
/ /	Full Name, Mailing Address and ZIP Code	Occupation, Name and Address of Principal Place Of Employment (If contribution exceeds \$100)	Amount	Calendar Year to Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			Office Use
/ /	Full Name, Mailing Address and ZIP Code	Occupation, Name and Address of Principal Place Of Employment (If contribution exceeds \$100)	Amount	Calendar Year to Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			Office Use
/ /	Full Name, Mailing Address and ZIP Code	Occupation, Name and Address of Principal Place Of Employment (If contribution exceeds \$100)	Amount	Calendar Year to Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			Office Use
/ /	Full Name, Mailing Address and ZIP Code	Occupation, Name and Address of Principal Place Of Employment (If contribution exceeds \$100)	Amount	Calendar Year to Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			Office Use
/ /	Full Name, Mailing Address and ZIP Code	Occupation, Name and Address of Principal Place Of Employment (If contribution exceeds \$100)	Amount	Calendar Year to Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			Office Use
/ /	Full Name, Mailing Address and ZIP Code	Occupation, Name and Address of Principal Place Of Employment (If contribution exceeds \$100)	Amount	Calendar Year to Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit			Office Use
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE			\$ 30 ⁰⁰	
TOTAL ITEMIZED CONTRIBUTIONS			\$ 2695	
TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS			\$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS			\$ 2695	

DISBURSEMENTS
Gross Expenditures

Complete Committee Name

FRIENDS FOR FRUMADEL

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	Office Use
4/5/02	SCOTT FRUMADEL 745 W. WASHINGTON ST. MADISON, WI 53715	REIMBURSEMENT ARABELLA AD PRODUCTION	137.50	
4/5/02	MAJORITY STRATEGIES 274 MARCONI BLVD. COLUMBUS, OH 43215	GET-OUT-THE- VOTE MAILING DESIGN & POSTAGE	3296.39	
5/1/02	W F I BANK P.O. Box 2045 MILWAUKEE, WI 53201	CHECK FEE	17.75	
6/30/02	MADISON TIMES 921 E. MAIN ST. MADISON WI 53703	NEWSPAPER AD.	283.00	
6/30/02	UMOTA P.O. BOX 2063 MADISON, WI 53701	ADVERTISING TYPESETING	145.00	
6/30/02	THE REPUBLICAN PARTY OF WISCONSIN P.O. Box 31 MADISON WI 53701	VOTER CONTACT SERVICES	294.38	
1 1				
1 1				
1 1				
SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE			\$ 4174.32	
TOTAL ITEMIZED EXPENDITURES			\$ 4174.32	
TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS			\$	
TOTAL EXPENDITURES			\$ 4174.32	