

**CAMPAIGN FINANCE REPORT  
STATE OF WISCONSIN**

Is this report an Amendment?      YES      NO X

**COMMITTEE IDENTIFICATION**

Name of Committee    Committee to Elect Michael Schumacher

Address                    517 Nova Way

City, State, ZIP        Madison, WI 53704

OFFICE USE ONLY

WSEB # ID

Please check if address is different than previously reported   

**NAME OF REPORT**    Jan 20\_\_X\_\_ Continuing    Pre-Primary 20\_\_    Spring    Fall    Special  
    July 20\_\_ Continuing    Pre-election 20\_\_    Spring    Fall    Special

**SUMMARY OF RECEIPTS AND DISBURSEMENTS**

**1. RECEIPTS**

**Column A  
This Period**

**Column B  
YTD**

**Audited Totals  
Office Use Only**

A. Contributions including Loans from Individuals	\$ 660.00	\$ 1,735.00		
B. Contributions from Committees (Transfers-In)	\$ 200.00	\$ 200.00		
C. Other Income and Commercial Loans	\$ 0.39	\$ 0.39		
<b>TOTAL RECEIPTS (Add totals from 1A, 1B, and 1C)</b>	<b>\$ 860.39</b>	<b>\$ 1,935.39</b>		

**1. DISBURSEMENTS**

A. Gross Expenditures	\$ -			
B. Contributions to Committees (Transfers-Out)	\$ -			
<b>TOTAL DISBURSEMENTS (Add totals from 2A and 2B)</b>	<b>\$ -</b>	<b>\$ -</b>		

**CASH SUMMARY**

Cash Balance at Beginning of Report	\$ 1,261.92			
Total Receipts	\$ 860.39			
Subtotal	\$ 2,122.31			
Total Disbursements	\$ -			
<b>CASH BALANCE AT END OF REPORT</b>	<b>\$ 2,122.31</b>			
<b>INCURRED OBLIGATIONS (at close of period)</b>	<b>\$ -</b>			
<b>LOANS (at close of period)</b>	<b>\$ -</b>			

*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 Michael T. Schumacher	Signature of Candidate or Treasurer <i>Michael T. Schumacher</i>	Date    1/28/2009
	Daytime Phone 242-1779	

NOTE: The information on this form is required by ss 11 06 11 20 Wis Stats  
 Failure to provide this information may subject you to the penalties of ss 11 60 11 62 Wisconsin Stats







