CAMPAIGN FINANCE REPORT LOCAL COMMITTEES OF WISCONSIN				DEGENVE TO SALVE TO S				
IsThis Report an Amendment: ☐ Yes ☐ No				10 10 10 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Instructions for completing schedules are on the t	1	į.						
COMMITTEE IDENTIFICATION	MADISON CITY CLERK							
Samba and Friends	B A B A							
5150 Crescent Oaks Dr				OFFICE USE ONLY				
City, State and Zip Code Madison, WI 53704								
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 Fa	II ☐ Spo	1					
☐ July Continuing ☐ Pre-Election	Spring Fa	all Spe	ecial	Termination Report also complete Schedule 4				
SUMMARY OF RECEIPTS AND	Column A	Colun						
DISBURSEMENTS	This Period	Calendar Year-To-Date						
1. RECEIPTS	\$160.00	-						
1A. Contributions (Including Loans) from Individuals	\$0.00	\$ 160.	.00					
1B. Contributions from Committees (Transfers-In)	\$0.00	\$ ().0) <u>O</u>					
1C. Other Income and Commercial Loans	\$160.00							
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C) 2. DISBURSEMENTS	-	<u> \$ 160</u>	.00					
2A. Gross Expenditures	\$0.00	\$ 0.00	· ·					
2B. Contributions to Committees (Transfers-Out)	\$0.00	\$ 0 00	າ					
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$0.00	\$ 0.0	0					
CASH SUMMARY								
Cash Balance Beginning of Report	\$0.00							
Total Receipts	\$160.00							
Subtotal	\$160.00							
Total Disbursements	\$0.00							
CASH BALANCE END OF REPORT	\$160.00							
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$0.00							
LOANS (Balance at the Close of This Períod-3B)	\$160.00							
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: 1/30/15								
Susan K. Pastor	man 61.	who	1	608-217.7099				

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-A

Complete Committee Name

RECEIPTS Contributions (Including Loans) From Individuals

Page 1 of 2

Samba ar	nd Friends	· · ·		
	r completing schedules are on the back of			
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
12/23/14	Samba Baldeh	IT Consultant, Self		160.00
•	5150 Crescent Oaks Drive		160.00	, , , , , , , , , , , , , , , , , , , ,
	Madison, WI 53704		700.00	·
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place		Calendar
	Turrente, maning radioss and Exp obdo	Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
1 1				
				,
				•
	a i a Di is i Di Ba i a	Conduit Name		,
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place	Amount	Calendar
	Tan ranno, manning rannoso and Elp 5000	Of Employment (if year-to-date total exceeds \$100)	, undan	Year-to-Date Total
/ /				
		1		
				,
		Construction of the constr		
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place	Amount	Calendar
	Tan Pariso, Planning Addices and Esp Code	Of Employment (if year-to-date total exceeds \$100)	Autoun	Year-to-Date Total
/ /				
	•			
	a D	i contant	·	
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name: Cocupation, Name and Address of Principal Place	Amount	Calendar
	r an riamo, maning radices and Elp Code	Of Employment (if year-to-date total exceeds \$100)	Amount	Year-to-Date Total
' '				
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place	Amount -	Calendar
	. In Hamily Hamily Hadrood and Lip Code	Of Employment (if year-to-date total exceeds \$100)	runoun.	Year-to-Date Total
1 1				
		0. 1.71		
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place	Amount	Calendar
1		Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
1 1	•	() 1		
		! !		
		; ;		
-	Obash # Dis 16st Disselland	Conduit Name:		
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
, ,		Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
′′′				
				<u> </u>
	•			
	Check if: In-Kind I Loan Conduit	Conduit Name:		
<u></u>	Oneon a. Internet I conf Conduit	- Verrage Paris.	100.00	
	SUBT	OTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 160.00	
		TOTAL ITEMIZED CONTRIBUTIONS	s 160.00	
		TOTAL ITEMIZED CONTRIBUTIONS		·
	TOTAL	. UNITEMIZED CONTRIBUTIONS \$20 OR LESS	\$ 0.00	•
	TOTAL 001	STORUTIONS DESCRIED FROM INDIVIDUALS	s 160.00	



ADDITIONAL DISCLOSURE

Loans Individual, Committee or Commercial

Complete Committee Name	-					
L. Sambaandf	niends		•			
Instructions for completing schedules are	on the back of each schedule					
Full Name, Mailing Address ar	nd Zip Code of Loan Source	Outstanding	T .	Cumulative	Outstanding	
Samba Baldeh		Balance Beginning of This Period	New Loans This	Payments	Balance	
Date 5150 Crescent Oaks I	Or .	Of This Pelicu	Period	This Period	End of This Period	
12 / 23 / 14 Madison, WI 53704		-0-	160.00	-0-	16000	
List All Endorsers or Guarantors (if any)			1.00.		1 100 1	
Full Name Mailing Add 171 G	Occupation	,	•			
Full Name, Mailing Address and Zip Code of Guarantor						
	Name and Address of Employer					
·						
	Amount Guaranteed Outstanding					
Full Name, Mailing Address and Zip Code	\$ Occupation					
of Guarantor						
	Name and Address of Employer					
	Amount Guaranteed Outstanding					
	\$					
Full Name, Mailing Address and	d Zip Code of Loan Source	Outstanding Balance Beginning	Nal	Cumulative	Outstanding	
Date		of This Period	New Loans This Period	Payments This Period	Balance End of This Period	
					·	
List All Endorsers or Guarantors (if any)						
Full Name, Mailing Address and Zip Code of Guarantor	Occupation					
or obtaining.	Name and Address of Employer					
	Italia and Address of Employer		•			
	Amount Guaranteed Outstanding	T				
Full Name, Mailing Address and Zip Code	\$ Occupation		·			
of Guarantor	Cocapanon		•			
	Name and Address of Employer					
	Amount Guaranteed Outstanding					
	\$	•				
Full Name, Mailing Address and		Outstanding		I Cumulative	Outstanding	
		Balance Beginning of This Period	New Loans This Period	Payments This Period	Balance End of This Period	
Date			70.00	This renou	Etid of This Penod	
/ /						
List All Endorsers or Guarantors (if any)						
Full Name, Mailing Address and Zip Code	Occupation .					
of Guarantor	Name and Address of Employer					
Amount Guaranteed Outstanding						
Sup Man Brant Andrew	\$					
Full Name, Mailing Address and Zip Code of Guarantor	Occupation					
Name and Address of Employer						
	Amount Guaranteed Outstanding					
				· I		

SUBTOTAL OUTSTANDING LOANS THIS PAGE \$ 1600

TOTAL OUTSTANDING LOANS \$ 16000