I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

LOANS (Balance at the Close of This Period-3B)

\$

Type or Print Name of Candidate or Treasurer	Signature of Candidate or Treasurer	Date: 5/16/15
Della I Williams	100	110(19
Deborah Williams	Email	Daytime Phone: (DS-841.722/

**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-C

## RECEIPTS Other Income and Commercial Loans

Dage	of
Page	UI

Complete Committee Name fricals of Rich Williams	
Instructions for completing schedules are on the back of each schedule.	

Date	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
2127/15			
	wells Fargo	Interest	\$ 0.01
			,
Date	Full Name, Mailing Address and Zip Code	Type of Income	Amount
11 12015	of Source of Income		
4 130/15	I selle Free	Interest	\$0.01
	wells Forzo	(01) = 031	\$0.01
Date	Full Name, Mailing Address and Zip Code	Type of Income	Amount
1 12015	of Source of Income	lyps of moonie	YMIOUR
613015	wells Farzo	1	١
	(0-Co(3 (0-30	Interest	\$0.01
Date	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
.1 1	of Source of meonie		
Date	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
1 1	or source of incorpte		
!			,
	·		
Date	Full Name, Mailing Address and Zip Code	Type of Income	Amount
1 1	of Source of Income		
Date	Full Name, Mailing Address and Zip Code	Type of Income	Amount
, ,	of Source of Income		
, ,			
Date	Full Name, Mailing Address and Zip Code	Type of Income	Amount
, ,	of Source of Income		
, ,			
Date	Full Name, Mailing Address and Zip Code	Type of Income	Amount
, ,	of Source of Income	. Jpe of moonie	, and only
′′′			
Date	Full Name, Mailing Address and Zip Code	Type of Income	Amount
	of Source of Income	Type of meeting	Amount
′ ′			No.
•			
		l	
		0,03	
SUBTOTAL OTHER INCOME THIS PAGE		\$ 0,00	
		b	
TOTAL ITEMIZED OTHER INCOME		\$	
			· /

TOTAL UNITEMIZED OTHER INCOME \$20 OR LESS | \$

TOTAL OTHER INCOME \$ 0.03