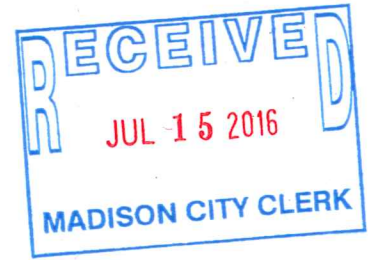


**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

Is This Report an Amendment: Yes No

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



COMMITTEE IDENTIFICATION

Name of Committee: Samba and Friends
 Street Address: 5150 Crescent Oaks Dr
 City, State and Zip Code: Madison WI 53704

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 _____ Pre-Primary _____
 July Continuing 16 Spring Fall Special
 September Continuing _____ Pre-Election _____
- Termination Report
also complete Schedule 4

SUMMARY OF RECEIPTS AND DISBURSEMENTS	Column A This Period	Column B Calendar Year-To-Date
1. RECEIPTS		
1A. Contributions (Including Loans) from Individuals	\$	\$
1B. Contributions from Committees (Transfers-In)	\$	\$
1C. Other Income and Commercial Loans	\$.01	\$.01
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$.01	\$.01
2. DISBURSEMENTS		
2A. Gross Expenditures	\$ 23.00	\$ 23.00
2B. Contributions to Committees (Transfers-Out)	\$	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 23.00	\$ 23.00

CASH SUMMARY	
Cash Balance Beginning of Report	\$ 292.08
Total Receipts	\$.01
Subtotal	\$ 292.09
Total Disbursements	\$ 23.00
CASH BALANCE END OF REPORT	\$ 269.09
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$
LOANS (Balance at the Close of This Period-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 <u>Susan K. Pastor</u>	Signature of Candidate or Treasurer <u>Susan K. Pastor</u>	Date: <u>7-15-16</u>
	Email: <u>skpastore@skglobal.net</u>	Daytime Phone: <u>608-217-7099</u>

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.

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name
Samba and Friends

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
3/24	Summit Credit Union 4800 American Pkwy MADISON WI 53718 Check if: <input type="checkbox"/> In-Kind Offset	print checks	\$18.00
3/31	Summit Credit Union 4800 American Pkwy madison WI 53718 Check if: <input type="checkbox"/> In-Kind Offset	acct annual fee	\$5.00
	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 \$ 23.00

TOTAL ITEMIZED EXPENDITURES \$ 23.00

TOTAL UNITEMIZED EXPENDITURES \$

TOTAL EXPENDITURES \$ 23.00

Loans
Individual, Committee or Commercial
ADDITIONAL DISCLOSURE

Complete Committee Name
Samba and Friends

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

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
12/23/14	Samba Baldeh 5150 Crescent Oaks Dr Madison WI 53704	160.00			160.00

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
/ /					

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
/ /					

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

SUBTOTAL OUTSTANDING LOANS THIS PAGE \$ 160.00

TOTAL OUTSTANDING LOANS \$ 160.00