

**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: Robert Miller Co City Comy
 Street Address: 227 S. VAN BUREN ST
 City, State and Zip Code: GREEN BAY WI 54301

RECEIVED
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 BY: _____
 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 _____ 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	\$ 835.95	\$ 3479.57
1B. Contributions from Committees (Transfers-In)	\$	\$
1C. Other Income and Commercial Loans	\$	\$
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 835.95	\$ 3479.57
2. DISBURSEMENTS		
2A. Gross Expenditures	\$ 863.46	\$ 3479.57
2B. Contributions to Committees (Transfers-Out)	\$	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 863.46	\$ 3479.57

CASH SUMMARY

Cash Balance Beginning of Report	\$ 43.63
Total Receipts	\$ 0
Subtotal	\$ 0
Total Disbursements	\$ 43.63
CASH BALANCE END OF REPORT	\$ 0
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ 0
LOANS (Balance at the Close of This Period-3B)	\$ 0

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>R. J. MILLER</u>	Signature of Candidate or Treasurer <u>R. J. Miller</u> Email	Date: <u>7/15/22</u> Daytime Phone: _____
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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 1-A

RECEIPTS

Contributions (Including Loans) From Individuals

Complete Committee Name
Roberts Miller for City Council

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

Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation (If year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
3/24/22	Rob Miller 131 S VAN BUREN G B W S	ATTY + REAL ESTATE IN	240.63	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
3/31/22	R. Miller	" "	75.00	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
3/31/22	R. Miller	" "	488.20	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
3/31/22	R. Miller	" "	16.00	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
4/1/22	Woody 400 Blyden St S.E. Cn	Refund on Woody	16.12	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 835	95
TOTAL ITEMIZED CONTRIBUTIONS	\$	
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$ 835	95

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name

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Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
3/20/22	BADGERLAND PRINT Check if: <input checked="" type="checkbox"/> In-Kind Offset	Printing	43.63
3/24/22	BADGERLAND PRINT Check if: <input type="checkbox"/> In-Kind Offset	Print	240.63
	 Check if: <input type="checkbox"/> In-Kind Offset		
3/27/22	Brian Verheyden 2434 SUNFIC DR. PULASKI, WI 54162 Check if: <input type="checkbox"/> In-Kind Offset	text messg	75.00
3/31/22	MAIL HAUS 1843 INDUSTRIAL DR DE PER, WI 54115 Check if: <input type="checkbox"/> In-Kind Offset	mailing	488.20
3/31/22	Webby 400 Bryant St. S.F. CA Check if: <input type="checkbox"/> In-Kind Offset	web s.h	16.00
	 Check if: <input type="checkbox"/> In-Kind Offset		
	 Check if: <input type="checkbox"/> In-Kind Offset		

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE

\$

TOTAL ITEMIZED EXPENDITURES

\$

TOTAL UNITEMIZED EXPENDITURES

\$

TOTAL EXPENDITURES

\$

863.46