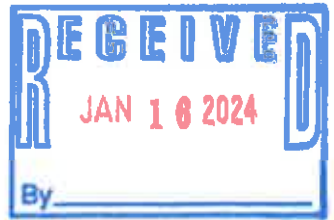


**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

Is This Report an Amendment: Yes No

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



COMMITTEE IDENTIFICATION

Name of Committee

Bob Tierney for KUSD School board

Street Address

7822 27th ave

City, State and Zip Code

Kenosha WI 53143

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 2024 Pre-Primary _____
 July Continuing _____ Spring Fall Special
 September Continuing _____ Pre-Election _____
- Termination Report
attach CF-13,
Termination Request

SUMMARY OF RECEIPTS AND DISBURSEMENTS

	Column A This Period	Column B Calendar Year-To-Date
1. RECEIPTS		
1A. Contributions (Including Loans) from Individuals	\$ 49.43	\$ 49.43
1B. Contributions from Committees (Transfers-In)	\$	\$
1C. Other Income and Commercial Loans	\$	\$
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 49.43	\$ 49.43
2. DISBURSEMENTS		
2A. Gross Expenditures	\$ 29.43	\$
2B. Contributions to Committees (Transfers-Out)	\$	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 29.43	\$

CASH SUMMARY

Cash Balance Beginning of Report	\$ 49.43
Total Receipts	\$ 49.43
Subtotal	\$ 49.43
Total Disbursements	\$ 29.43
CASH BALANCE END OF REPORT	\$ 20.00
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$
LOANS (Balance at the Close of This Period-3B)	\$ 49.43

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 Robert Tierney	Signature of Candidate or Treasurer 	Date: <u>1/16/2024</u>
	Email: <u>tierney4kuso@gmail.com</u>	Daytime Phone: <u>224-214-9461</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.

Complete Committee Name

Bob Tierney for Road School board

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
<i>12/5/23</i>	<i>Robert Tierney 7822 27th ave Kenosha, WI 53143</i>		<i>\$49.43</i>	<i>\$ 49.43</i>
	Check If: <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
	Check If: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
	Check If: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
	Check If: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
	Check If: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
	Check If: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$	
TOTAL ITEMIZED CONTRIBUTIONS	\$	<i>49.43 49.43</i>
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$	<i>49.43 49.43</i>

SCHEDULE 2-A

**DISBURSEMENTS
Gross Expenditures**

Complete Committee Name
Bob Tierney for Lusd School board

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
2/13/23	Educators Credit Union 4215 Gree bay rd. Kenosha, WI 53144 Check if: <input type="checkbox"/> In-Kind Offset	purchased checks	\$29.43
	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		
	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	\$ <u>29.43</u>

**Loans
Individual, Committee or Commercial
ADDITIONAL DISCLOSURE**

Complete Committee Name
Bob Tierney for KUSD school board

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

	Full Name, Mailing Address and Zip Code of Loan Source Robert Tierney 7822 87th ave Kenosha, WI 53143	Outstanding Obligations Beginning of This Period	New Loans This Period 49.43	Cumulative Payments This Period	Outstanding Obligations End of This Period
Date 12.13.23					

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 \$

	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
Date / /					

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 \$

	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
Date / /					

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 \$

TOTAL OUTSTANDING LOANS \$ **49.43**