

SPECIAL REPORT OF LATE CONTRIBUTION

CANDIDATE/COMMITTEE/INDIVIDUAL INFORMATION

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|--|--|
| Candidate/Committee/Individual Name <i>Friends of Julie Lassa</i> | WSEB I.D. # (if assigned) <i>103147</i> |
| Address (Number, Street) <i>P.O. Box 483</i> | |
| City, State, Zip Code <i>Plover WI 54467</i> | Telephone Number <i>715-342-0526</i> |

CONTRIBUTOR INFORMATION (See Instructions on Reverse Side of Form)

| | |
|---|--|
| Complete Name of Contributor <i>Jack Rosenberg</i> | Date of Contribution <i>4/21/03</i> |
| Address (Number and Street) of Contributor <i>3431 North Lake Dr</i> | AMOUNT OR FAIR MARKET VALUE OF CONTRIBUTION \$ <i>500.00</i> |
| City, State, Zip Code <i>Milwaukee WI 53211</i> | Total Contribution(s) Received From Contributor Since Last Report \$ <i>500.00</i> |
| Occupation <i>Retired</i> | |
| Name and Address of Principal Place of Employment | |

| | |
|---|--|
| Complete Name of Contributor | Date of Contribution |
| Address (Number and Street) of Contributor | AMOUNT OR FAIR MARKET VALUE OF CONTRIBUTION \$ |
| City, State, Zip Code | Total Contribution(s) Received From Contributor Since Last Report \$ |
| Occupation | |
| Name and Address of Principal Place of Employment | |

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| | |
|---|--|
| Complete Name of Contributor | Date of Contribution |
| Address (Number and Street) of Contributor | AMOUNT OR FAIR MARKET VALUE OF CONTRIBUTION \$ |
| City, State, Zip Code | Total Contribution(s) Received From Contributor Since Last Report \$ |
| Occupation | |
| Name and Address of Principal Place of Employment | |

I, *Julie M. Lassa*, certify that the information in this report is true, correct and complete.

Julie M. Lassa
(PRINT NAME)
Signature of Candidate or Treasurer

4-22-03
Date

THE INFORMATION ON THIS FORM IS REQUIRED BY ss. 11.12(5), 11.23(6), STATS. FAILURE TO PROVIDE THE INFORMATION MAY SUBJECT YOU TO THE PENALTIES OF ss. 11.60, 11.61, 11.66, STATS.

THIS FORM IS PRESCRIBED BY THE WISCONSIN STATE ELECTIONS BOARD, 132 EAST WILSON STREET, SUITE 200, MADISON, WI 53702 (608) 266-8005

XED SPECIAL REPORT OF LATE CONTRIBUTION

CANDIDATE/COMMITTEE/INDIVIDUAL INFORMATION

| | |
|---|---|
| Candidate/Committee/Individual Name <u>Committee to Elect Lena C. Taylor</u> | WSEB I.D. # (if assigned) <u>104170</u> |
| Address (Number, Street) <u>3428 W. State Street</u> | |
| City, State, Zip Code <u>Milwaukee, WI 53208</u> | Telephone Number <u>(414) 344-4529</u> |

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CONTRIBUTOR INFORMATION (See Instructions on Reverse Side of Form)

| | |
|--|--|
| Complete Name of Contributor <u>Service Employees International Union</u> | Date of Contribution <u>4/21/03</u> |
| Address (Number and Street) of Contributor <u>8021 W. Tower Ave</u> | AMOUNT OR FAIR MARKET VALUE OF CONTRIBUTION. \$ <u>500⁰⁰</u> |
| City, State, Zip Code <u>Milwaukee WI 53223</u> | |
| Occupation <u>union</u> | Total Contribution(s) Received From Contributor Since Last Report \$ <u>500⁰⁰</u> |
| Name and Address of Principal Place of Employment <u>n/a</u> | |

| | |
|---|--|
| Complete Name of Contributor <u>Wacker - Backus for School Board</u> | Date of Contribution <u>4/21/03</u> |
| Address (Number and Street) of Contributor <u>10628 W. Boblink Ave #12</u> | AMOUNT OR FAIR MARKET VALUE OF CONTRIBUTION. \$ <u>580⁰⁰</u> |
| City, State, Zip Code <u>Milwaukee, WI 53225</u> | |
| Occupation | Total Contribution(s) Received From Contributor Since Last Report \$ <u>580⁰⁰</u> |
| Name and Address of Principal Place of Employment | |

| | |
|---|--|
| Complete Name of Contributor | Date of Contribution |
| Address (Number and Street) of Contributor | AMOUNT OR FAIR MARKET VALUE OF CONTRIBUTION. \$ _____ |
| City, State, Zip Code | |
| Occupation | Total Contribution(s) Received From Contributor Since Last Report \$ _____ |
| Name and Address of Principal Place of Employment | |

I, Dana Phillips, certify that the information in this report is true, correct and complete.

Dana D. Phillips 4/21/03
Signature of Contributor or Treasurer Date

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