

**CAMPAIGN FINANCE REPORT
STATE OF WISCONSIN**

RECEIVED-CITY OF MADISON
CLERK'S OFFICE

Is This Report an Amendment: Yes No

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

02 AUG 20 P11 2:13

COMMITTEE IDENTIFICATION

Name of Committee

THE GREATER MADISON CHAPTER WISCONSIN EMPLOYERS ASSOCIATION

Street Address

576 GRAND CANYON DRIVE

OFFICE USE ONLY

City, State and Zip Code

MADISON WI 53719

WSEB ID Number:

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 20__ Pre-Primary 20__ Spring Fall Special
- July Continuing 20*02* Pre-Election 20__ Spring Fall Special

Termination Report
also complete Schedule 4

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

	Column A This Period	Column B Calendar Year-To-Date	Audited Totals Office Use Only	
A. Contributions including Loans from Individuals	\$	\$	\$	\$
B. Contributions from Committees (Transfers-In)	\$	\$	\$	\$
C. Other Income and Commercial Loans	\$ <i>1266.00</i>	\$	\$	\$
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$	\$	\$	\$

2. DISBURSEMENTS

A. Gross Expenditures	\$ <i>1000.00</i>	\$	\$	\$
B. Contributions to Committees (Transfers-Out)	\$	\$	\$	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$	\$	\$	\$

CASH SUMMARY

Cash Balance Beginning of Report	\$ <i>349.97</i>	\$
Total Receipts	\$ <i>1266.00</i>	\$
Subtotal	\$	\$
Total Disbursements	\$ <i>1000.00</i>	\$
CASH BALANCE END OF REPORT	\$ <i>615.97</i>	\$
INCURRED OBLIGATIONS (Balance at the Close of This Period)	\$	\$
LOANS (Balance at the Close of This Period)	\$	\$

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

DAVID MONTE

Signature of Candidate or Treasurer

[Signature]

Date:

8/18/02

Daytime Phone:

608-893-3511

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.

4600

DISBURSEMENTS
Gross Expenditures

Complete Committee Name

THE GREATER MADISON CHAPTER WISCONSIN TOWNSHIP

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	Office Use
<i>6/29/02</i>	<i>THE GREATER MADISON HOSPITALITY COUNCIL</i>	<i>Support of THE COUNCIL</i>	<i>\$ 1000.00</i>	
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SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE			<i>\$ 1000.00</i>	
TOTAL ITEMIZED EXPENDITURES			\$	
TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS			\$	
TOTAL EXPENDITURES			<i>\$ 1000.00</i>	