

**CAMPAIGN FINANCE REPORT  
STATE OF WISCONSIN**

RECEIVED CITY OF MADISON  
CLERKS OFFICE

Is This Report an Amendment:  Yes  No

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

02 JAN 31 AM 11:27

**COMMITTEE IDENTIFICATION**

Name of Committee

Stokes for School Board

Street Address

6206 Walden Way

City, State and Zip Code

Madison, WI 53719

OFFICE USE ONLY

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\_\_  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	\$ 0	\$ 0	\$	\$
B. Contributions from Committees (Transfers-In)	\$ 0	\$ 0	\$	\$
C. Other Income and Commercial Loans	\$ 0	\$ 0	\$	\$
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)	\$ 0	\$ 0	\$	\$

**2. DISBURSEMENTS**

A. Gross Expenditures	\$ 2,829.64	\$	\$	\$
B. Contributions to Committees (Transfers-Out)	\$ 0	\$	\$	\$
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	\$ 2,829.64	\$	\$	\$

**CASH SUMMARY**

Cash Balance Beginning of Report	\$ 2,829.64	\$
Total Receipts	\$ 0	\$
Subtotal	\$ 2,829.64	\$
Total Disbursements	\$ 2,829.64	\$
<b>CASH BALANCE END OF REPORT</b>	\$ 0	\$
<b>INCURRED OBLIGATIONS</b> (Balance at the Close of This Period)	\$ 0	\$
<b>LOANS</b> (Balance at the Close of This Period)	\$ 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	Signature of Candidate or Treasurer	Date:
Marian R. Stokes	Marian R. Stokes	1-30-0
		Daytime Phone:

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.

**DISBURSEMENTS  
Gross Expenditures**

Complete Committee Name  
Stokes for 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	Office Use
12/31/01	Salvation Army Dane County Center 630 E. Washington Ave. Madison, WI 53703	Donation to close Campaign account	57.94	
7/12/01	City of Fitchburg 5220 Lacy Rd. Madison, WI 53711	M. Stokes to reimburse for payment made to: Mailing List (Reimburse)	25.00	
7/12/01	Marian Stokes - Reimburse for Mailing Lists 6206 Walden Way Madison, WI 53719	Reimburse for mailing lists	40.00	
7/12/01	David and Marian Stokes 6206 Walden Way Madison, WI 53719	Loan Payment	2,706.70	
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
<b>SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE</b>			\$ 2,829.64	
<b>TOTAL ITEMIZED EXPENDITURES</b>			\$ 2,829.64	
<b>TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS</b>			\$ 0	
<b>TOTAL EXPENDITURES</b>			\$ 2,829.64	

**ADDITIONAL DISCLOSURE  
Incurred Obligations Excluding Loans**

Complete Committee Name  
Stokes for School Board

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

Date	Full Name, Mailing Address and ZIP Code of Creditor	Outstanding Balance Beginning This Period	New Obligations This Period	Payment This Period	Outstanding Balance at Close of This Period	Office Use Only
3/13/00	City of Fitchburg 5220 Lacy Rd. Madison, WI 53711	25.00		25.00 7/12/01	0	
Nature of Debt (Purpose):						
3/13/00	Unitemized obligations \$20.00 or less - Total	40.00		40.00 7/12/01	0	
Nature of Debt (Purpose):						
Nature of Debt (Purpose):						
Nature of Debt (Purpose):						
Nature of Debt (Purpose):						
Nature of Debt (Purpose):						
Nature of Debt (Purpose):						
Nature of Debt (Purpose):						

<b>SUBTOTAL ITEMIZED OBLIGATIONS THIS PAGE</b>	\$	0
<b>TOTAL ITEMIZED OBLIGATIONS</b>	\$	
<b>TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS</b>	\$	
<b>TOTAL INCURRED OBLIGATIONS</b>	\$	0

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

Complete Committee Name  
Stokes for School Board

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

*Original Loan Date*

		Outstanding Balance Beginning of This Period	Cumulative Payments This Period	Outstanding Balance End of This Period
Date	Full Name, Mailing Address and ZIP Code of Loan Source			
<u>3/21/00</u>	<u>Marian and David Stokes 6206. Walden Way Madison, WI 53719</u>	<u>6,760.77</u>	<u>2,706.70</u>	<u>4,054.07</u>
List All Endorsers or Guarantors (if any)				
Full Name, Mailing Address and Zip Code of Guarantor		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding		
		\$		
Full Name, Mailing Address and Zip Code of Guarantor		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding		
		\$		
Date	Full Name, Mailing Address and ZIP Code of Loan Source			
List All Endorsers or Guarantors (if any)				
Full Name, Mailing Address and Zip Code of Guarantor		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding		
		\$		
Full Name, Mailing Address and Zip Code of Guarantor		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding		
		\$		
Date	Full Name, Mailing Address and ZIP Code of Loan Source			
List All Endorsers or Guarantors (if any)				
Full Name, Mailing Address and Zip Code of Guarantor		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding		
		\$		
Full Name, Mailing Address and Zip Code of Guarantor		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding		
		\$		

**SUBTOTAL OUTSTANDING LOANS THIS PAGE** \$ 4,054.07  
**TOTAL OUTSTANDING LOANS** \$ 4,054.07

**ADDITIONAL DISCLOSURE  
Contributions Returned to Contributor**

Complete Committee Name  
Stokes for School Board

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

Date of Original Contribution	Name and Address of Contributor	Amount Returned
<b>SUBTOTAL ITEMIZED RETURNED CONTRIBUTIONS</b>		<b>\$</b>
<b>TOTAL UNITEMIZED RETURNED CONTRIBUTIONS \$20 OR LESS</b>		<b>\$</b>
<b>TOTAL RETURNED CONTRIBUTIONS</b>		<b>\$ 0</b>

**ADDITIONAL DISCLOSURE  
Contributions Donated to Charity or Common School Fund**

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

Date of Donation	Name and Address of Donee	Reason for Donation	Amount of Donation
12-31-01	Salvation Army Dane County Center 630 E. Washington Ave. Madison, WI 53703-2981	Terminating Committee	57.94
<b>SUBTOTAL ITEMIZED DONATED CONTRIBUTIONS</b>			<b>\$ 57.94</b>
<b>TOTAL DONATED CONTRIBUTIONS</b>			<b>\$ 57.94</b>

**SCHEDULE 4**

**TERMINATION REQUEST**

Complete Committee Name

Stokes for School Board

WSEB ID Number

- A committee may terminate its registration and reporting requirements if the committee will no longer receive contributions, make disbursements or incur obligations, and the cash balance has been reduced to zero.
- Candidates may not terminate prior to the election in which they are participating.
- Please read carefully and, if necessary, indicate how residual committee funds have been disposed of or if outstanding loans or obligations have been forgiven. Sign and date the termination request at the bottom of this page.
- Make sure the termination box on the cover page of this report is checked.

**DISPOSAL OF RESIDUAL FUNDS**

*THIS INFORMATION SHOULD ALSO BE INCLUDED ON SCHEDULE 2A OR 2B.*

Date	Recipient	Amount
12-31-01	Salvation Army Dane County Center 630 E. Washington Ave. Madison, WI 53703	57.94

**LOAN OR DEBT FORGIVENESS**

*I hereby forgive all personal loans or have assumed responsibility for any and all debts of my campaign committee.*

Date	Endorser, Guarantor, or Creditor	Amount
12-31-01	David and Marian Stokes 6206 Walden Way Madison, WI 53719	4,054.07

TERMINATION REQUEST. I hereby request that the committee registration be terminated. I declare that the committee has not incurred any obligations and does not anticipate incurring any. The committee does not anticipate receiving any further contributions or making any disbursements. I further state that the cash balance has been reduced to zero and that all remaining funds have been disposed of in the manner prescribed by law.

Marian R. Stokes  
Signature of Candidate or Treasurer

1-30-02  
Date