

**CAMPAIGN FINANCE REPORT  
STATE 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

**GET REAL PAC**

Street Address

**1526 Golf View Rd # G**

City, State and Zip Code

**Madison, WI 53704**

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     Pre-Primary     Spring     Fall     Special  
 July Continuing **2004**     Pre-Election     Spring     Fall     Special

Termination Report  
also complete Schedule 4

**SUMMARY OF RECEIPTS AND  
DISBURSEMENTS**

Column A  
This Period

Column B  
Calendar  
Year-To-Date

Audited Totals  
Office Use Only

**1. RECEIPTS**

1A. Contributions (Including Loans) from Individuals	\$ 828.00	\$ 903.00	\$	\$
1B. Contributions from Committees (Transfers-In)	\$ -	\$ 5.67	\$	\$
1C. Other Income and Commercial Loans	\$	\$	\$	\$
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)	\$ 828.-	\$ 908.67	\$	\$

**2. DISBURSEMENTS**

2A. Gross Expenditures	\$ 563.69	\$ 582.19	\$	\$
2B. Contributions to Committees (Transfers-Out)	\$ -	\$ 572.57	\$	\$
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	\$ 563.69	\$ 1154.76	\$	\$

**CASH SUMMARY**

Cash Balance Beginning of Report	\$ 289.81	\$
Total Receipts	\$ 828.00	\$
Subtotal	\$ 1117.81	\$
Total Disbursements	\$ 563.69	\$
<b>CASH BALANCE END OF REPORT</b>	\$ 554.12	\$
<b>INCURRED OBLIGATIONS</b> (Balance at the Close of This Period-3A)	\$ -	\$
<b>LOANS</b> (Balance at the Close of This Period-3B)	\$ -	\$

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 <b>Nancy G. Harper</b>	Signature of Candidate or Treasurer <i>Nancy G. Harper</i>	Date <b>7/12/04</b> Daytime Phone: <b>249-8243</b>
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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.

RECEIVED-CITY OF MADISON  
CLERKS OFFICE  
04 JUL 15 PM 12:41

OFFICE USE ONLY

RECEIPTS  
Contributions (Including Loans) From Individuals

Complete Committee Name

Get Real PAC

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

Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
3/24/04	Mrs. Lyndon Breaks 229 Carillon Dr. Madison, WI 53705 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan		25.-	25.- Office Use
3/24/04	Stanley C. Durose, Jr. 201 Durose Terr. Madison, WI 53705 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan		25.-	25.- Office Use
3/26/04	Helen L. Harloff 5019 Sheboygan Ave. Madison, WI 53705 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan		25.-	25.- Office Use
3/25/04	Perry J. Schappe 510 Leroy Rd. Madison, WI 53704 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan		50.00	50.- Office Use
3/27/04	William J. Kumpf 230 Glacier Dr. Madison, WI 53705 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan		50.00	50.- Office Use
3/31/04	David Onsager 5314 Queensbridge Rd. Madison, WI 53714 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan		100.00	100.- Office Use
3/29/04	Dale A. Nordeen 4206 Yuma Dr. Madison, WI 53711 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan		30.-	30.- Office Use
3/28/04	Wilson B. Thiede 15 Kessel Ct. #33 Madison, WI 53711 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan		50.-	50.- Office Use
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE			\$ 355.-	
TOTAL ITEMIZED CONTRIBUTIONS			\$ 653.-	
TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS			\$ 175.-	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS			\$ 828.-	

RECEIPTS  
Contributions (Including Loans) From Individuals

Complete Committee Name

Get Real PAC

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Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
3/30/04	John A. Bolz 424 Farwell Dr. Madison, WI 53704		40.-	40.- Office Use
3/31/04	Ray F. Calkins 1401 AngelCrest Way Madison, WI 53716		30.-	30.- Office Use
3/31/04	Stanley A. Allen 1825 Sheridan Dr. Madison, WI 53704		25.-	25.- Office Use
3/31/04	Frederic E. Mohs 20 N. Carroll St. Madison, WI 53703		100.-	100.- Office Use
4/2/04	A.H. Bush, Jr. 30 Cambridge Rd. Madison, WI 53704		25.-	25.- Office Use
4/6/04	Kent Barlow 5909 Driftwood Ave. Madison, WI 53705		53.-	53.- Office Use
4/20/04	Bill Ridgely 1129 Artisan Dr. Madison, WI 53704		25.00	25.- Office Use
1 1				Office Use

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE \$ 298.00

TOTAL ITEMIZED CONTRIBUTIONS \$

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS \$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS \$

**DISBURSEMENTS  
Gross Expenditures**

Complete Committee Name  
Get Real PAC

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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	Office Use
3/24/04	Kinko's, 3908 E. Washington Ave. Madison, WI 53704 Check if: <input type="checkbox"/> In-Kind Offset	230 2-sided cvs. FR 1hr.	41.25	
3/24/04	Postmaster Madison, WI Check if: <input type="checkbox"/> In-Kind Offset	240 stamps @ 37¢	88.80	
4/20/04	" Check if: <input type="checkbox"/> In-Kind Offset	100 stamps @ 37¢	37.00	
4/2/04	MMI Executive Products 7431 Blazingstar Dr. Middleton, WI 53562 Check if: <input type="checkbox"/> In-Kind Offset	100 yard signs with wires	396.64	
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount	Office Use
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount	Office Use
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount	Office Use
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount	Office Use
<b>SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE</b>			\$ 563.69	
<b>TOTAL ITEMIZED EXPENDITURES</b>			\$ 563.69	
<b>TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS</b>			\$ -	
<b>TOTAL EXPENDITURES</b>			\$ 563.69	