

**CAMPAIGN FINANCE REPORT
STATE OF WISCONSIN**

Is This Report an Amendment: Yes No

RECEIVED-CITY OF MADISON
CLERKS OFFICE

04 JUL 20 PM 3:22

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

COMMITTEE IDENTIFICATION

Name of Committee

Friends of Austin King

Street Address

661 Mendota Ct. #409E

City, State and Zip Code

Madison, WI 53703

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 Pre-Primary Spring Fall Special
 July Continuing 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	\$ 0	\$ 0	\$	\$
1B. Contributions from Committees (Transfers-In)	\$ 200	\$ 200	\$	\$
1C. Other Income and Commercial Loans	\$ 0	\$ 0	\$	\$
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 200	\$ 200	\$	\$

2. DISBURSEMENTS

2A. Gross Expenditures	\$ 214.50	\$ 214.50	\$	\$
2B. Contributions to Committees (Transfers-Out)	\$ —	\$ —	\$	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 214.50	\$ 214.50	\$	\$

CASH SUMMARY

Cash Balance Beginning of Report	\$ 69.50	\$
Total Receipts	\$ 200.00	\$
Subtotal	\$ 269.50	\$
Total Disbursements	\$ 214.50	\$
CASH BALANCE END OF REPORT	\$ 55.50	\$
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ 0	\$
LOANS (Balance at the Close of This Period-3B)	\$ 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 <i>Austin King</i>	Signature of Candidate or Treasurer 	Date: <i>7/20/04</i> Daytime Phone: <i>2130104</i>
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NOTE: The information on this form is required by ss.11.60, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

SCHEDULE 2-A

**DISBURSEMENTS
Gross Expenditures**

Complete Committee Name

Friends of Annetta King

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
4/20/04	Garret Crowell 2441 E. Millin Madison WI 53704 Check if: <input type="checkbox"/> In-Kind Offset	design consulting	\$45	
6/23/04	Green Party of the United States P.O. Box 57065 Washington, D.C. 20037 Check if: <input type="checkbox"/> In-Kind Offset	Convention Registration	\$55	
6/24/04	US Bank 1 S. Pinckney St. Madison WI 53703 Check if: <input type="checkbox"/> In-Kind Offset	Banking Fees	\$114.50	
/ /	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
/ /	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
SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE			\$ 214.50	
TOTAL ITEMIZED EXPENDITURES			\$ 214.50	
TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS			\$ —	
TOTAL EXPENDITURES			\$ 214.50	

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

Complete Committee Name
Friends of Austin King

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

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Balance Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Balance End of This Period
4/20/04		45.00	—	45.00	0

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor <i>Garret Crowell 2441 E. Mitten Madison, WI 53704</i>	Occupation	
	Name and Address of Employer	
	Amount Guaranteed Outstanding \$	
Full Name, Mailing Address and Zip Code of Guarantor	Occupation	
	Name and Address of Employer	
	Amount Guaranteed Outstanding \$	

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Balance Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Balance End of This Period
1/1					

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation	
	Name and Address of Employer	
	Amount Guaranteed Outstanding \$	
Full Name, Mailing Address and Zip Code of Guarantor	Occupation	
	Name and Address of Employer	
	Amount Guaranteed Outstanding \$	

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Balance Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Balance End of This Period
1/1					

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation	
	Name and Address of Employer	
	Amount Guaranteed Outstanding \$	
Full Name, Mailing Address and Zip Code of Guarantor	Occupation	
	Name and Address of Employer	
	Amount Guaranteed Outstanding \$	

SUBTOTAL OUTSTANDING LOANS THIS PAGE	\$ 0
TOTAL OUTSTANDING LOANS	\$ 0