

**CAMPAIGN FINANCE REPORT
STATE OF WISCONSIN**

RECEIVED-CITY OF MADISON
CLERKS OFFICE

Is This Report an Amendment: Yes No

05 JAN 18 PM 3:07

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

COMMITTEE IDENTIFICATION

Name of Committee

Friends of Dorothy Borchardt

Street Address

1717 ELKA Lane

City, State and Zip Code

Madison WI 53704

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 2005 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

I. RECEIPTS

	Column A This Period	Column B Calendar Year-To-Date	Audited Totals Office Use Only	
1A. Contributions (Including Loans) from Individuals	\$	\$	\$	\$ 100.00
1B. Contributions from Committees (Transfers-In)	\$	\$	\$	\$
1C. Other Income and Commercial Loans	\$ 7.50	\$ 7.50	\$	\$
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 7.50	\$ 7.50	\$	\$ 107.50

2. DISBURSEMENTS

2A. Gross Expenditures	\$	\$	\$	\$ 206.50
2B. Contributions to Committees (Transfers-Out)	\$	\$	\$	\$ 250.00
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 00	\$ 00	\$	\$ 2318.50

CASH SUMMARY

Cash Balance Beginning of Report	\$ 276.05	\$
Total Receipts	\$ 7.50	\$
Subtotal	\$ 283.55	\$
Total Disbursements	\$.00	\$
CASH BALANCE END OF REPORT	\$ 283.55	\$
INCURRED OBLIGATIONS	\$ -	\$
(Balance at the Close of This Period-3A)	\$ -	\$
LOANS (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	Signature of Candidate or Treasurer	Date: 1-13-05
Larry Olson	Larry Olson	Daytime Phone: 274-2366

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.

RECEIPTS
Other Income and Commercial Loans

Complete Committee Name

Friends of Dorothy Borchardt

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

Date / /	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount	Office Use
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SUBTOTAL OTHER INCOME THIS PAGE			\$	
TOTAL ITEMIZED OTHER INCOME			\$	
TOTAL UNITEMIZED OTHER INCOME \$20 OR LESS			\$	7.50
TOTAL OTHER INCOME			\$	7.50