

**CAMPAIGN FINANCE REPORT  
STATE OF WISCONSIN**

Is this report an Amendment?

**YES** NO YES

RECEIVED-CITY OF MADISON  
CLERKS OFFICE

05 AUG -1 PM 1:51

**COMMITTEE IDENTIFICATION**

Name of Committee Citizens for Madison's Future  
Address P.O. 1004  
City, State, ZIP Madison, WI 53701-1004

OFFICE USE ONLY  
WSEB # ID

Please check if address is different than previously reported

**NAME OF REPORT**  
(Please circle)

Jan 20 Continuing Pre-Pr Spring Fall Special  
**July 20 Conti 2005** Spring Fall Special

**SUMMARY OF RECEIPTS AND DISBURSEMENTS**

	Column A This Period	Column B YTD	Audited Totals Office Use Only	
<b>1. RECEIPTS</b>				
A. Contributions including Loans from Individuals	\$700.00	\$2,645.00		
B. Contributions from Committees (Transfers-In)	\$3,272.29	\$7,169.09		
C. Other Income and Commercial Loans	\$0	\$0		
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B, and 1C)	\$3,972.29	\$9,814.09		
<b>1. DISBURSEMENTS</b>				
A. Gross Expenditures	\$5,554.32	\$8,567.61		
B. Contributions to Committees (Transfers-Out)	\$0	\$0		
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	\$ 5,554.32	\$8,567.61		

**CASH SUMMARY**

Cash Balance at Beginning of Report	\$2,828.51		
Total Receipts	\$3,972.29		
Subtotal	\$6,700.80		
Total Disbursements	\$ 5,554.32		
<b>CASH BALANCE AT END OF REPORT</b>	\$1,246.48		
<b>INCURRED OBLIGATIONS</b> (at close of period)	\$0		
<b>LOANS</b> (at close of 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: Carol Brooks

Signature of Candidate or Treasurer

Date

7/27/2005

*Carol Brooks*

Daytime Phone 251-6010

NOTE: The information on this form is required by ss. 11.06, 11.20, Wisconsin. Stats.





