

**CAMPAIGN FINANCE REPORT
STATE OF WISCONSIN**

RECEIVED CITY OF MADISON
CLERKS OFFICE

05 JUL 20 AM 9:13

Is This Report an Amendment: Yes No

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

COMMITTEE IDENTIFICATION

Name of Committee
PAUL EDWARD SKIDMORE (FRIENDS OF SKIDMORE)

Street Address
13 RED MAPLE TRAIL

City, State and Zip Code
MADISON, WI 53717

WSEB ID Number:

OFFICE USE ONLY

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 **2005** 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	\$ 0.00	\$ 605.00	\$	\$
1B. Contributions from Committees (Transfers-In)	\$ 0.00	\$ 200.00	\$	\$
1C. Other Income and Commercial Loans	\$ 0.00	\$ 0.00	\$	\$
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 0.00	\$ 805.00	\$	\$
2. DISBURSEMENTS				
2A. Gross Expenditures	\$ 120.00	\$ 418.96	\$	\$
2B. Contributions to Committees (Transfers-Out)	\$ 0.00	\$ 0.00	\$	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 120.00	\$ 418.96	\$	\$

CASH SUMMARY

Cash Balance Beginning of Report	\$ 1,896.48	\$
Total Receipts	\$ 0.00	\$
Subtotal	\$ 1,896.48	\$
Total Disbursements	\$ 120.00	\$
CASH BALANCE END OF REPORT	\$ 1,776.48	\$
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ 0.00	\$
LOANS (Balance at the Close of This Period-3B)	\$ 0.00	\$

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 PAUL EDWARD SKIDMORE	Signature of Candidate or Treasurer <i>Paul Skidmore</i>	Date: 7/20/05
		Daytime Phone: 608-845-3230

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

SCHEDULE 1-A

RECEIPTS
Contributions (Including Loans) From Individuals

Complete Committee Name
PAUL SKIDMORE (FRIENDS OF SKIDMORE)
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
/ /				Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan			
/ /				Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan			
/ /				Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan			
/ /				Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan			
/ /				Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan			
/ /				Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan			
/ /				Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan			
/ /				Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE \$ 0.00

TOTAL ITEMIZED CONTRIBUTIONS \$ 0.00

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS \$ 0.00

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS \$ 0.00

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name
PAUL SKIDMORE (FRIENDS OF SKIDMORE)

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
/ /	Check if: <input type="checkbox"/> In-Kind Offset			
/ /	Check if: <input type="checkbox"/> In-Kind Offset			
/ /	Check if: <input type="checkbox"/> In-Kind Offset			
/ /	Check if: <input type="checkbox"/> In-Kind Offset			
/ /	Check if: <input type="checkbox"/> In-Kind Offset			
/ /	Check if: <input type="checkbox"/> In-Kind Offset			
/ /	Check if: <input type="checkbox"/> In-Kind Offset			
/ /	Check if: <input type="checkbox"/> In-Kind Offset			
/ /	Check if: <input type="checkbox"/> In-Kind Offset			
SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE			\$ 0.00	
TOTAL ITEMIZED EXPENDITURES			\$ 0.00	
TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS			\$ 120.00	
TOTAL EXPENDITURES			\$ 120.00	