

**CAMPAIGN FINANCE REPORT  
STATE OF WISCONSIN**

RECEIVED-CITY OF MADISON  
CLERKS OFFICE  
05 MAR 21 PM 2:29

Is This Report an Amendment:     Yes             No

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

**COMMITTEE IDENTIFICATION**

Name of Committee

Friends Of Santiago Rosas

Street Address

3385 Basil Drive

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     Pre-Primary     Spring     Fall     Special

July Continuing     Pre-Election 2005     Spring     Fall     Special

Termination Report  
also complete Schedule 4

**SUMMARY OF RECEIPTS AND  
DISBURSEMENTS**

**1. RECEIPTS**

	Column A This Period	Column B Calendar Year-To-Date	Audited Totals Office Use Only	
1A. Contributions (Including Loans) from Individuals	\$	\$	\$	\$
1B. Contributions from Committees (Transfers-In)	\$ 200.00	\$ 200.00	\$	\$
1C. Other Income and Commercial Loans	\$	\$	\$	\$
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)	\$ 200.00	\$ 200.00	\$	\$

**2. DISBURSEMENTS**

2A. Gross Expenditures	\$	\$	\$	\$
2B. Contributions to Committees (Transfers-Out)	\$ 50.00	\$ 50.00	\$	\$
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	\$ 50.00	\$ 50.00	\$	\$

**CASH SUMMARY**

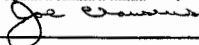
Cash Balance Beginning of Report	\$ 4723.29	\$
Total Receipts	\$ 200.00	\$
Subtotal	\$ 4923.29	\$
Total Disbursements	\$ 50.00	\$
<b>CASH BALANCE END OF REPORT</b>	\$ 4873.29	\$
INCURRED OBLIGATIONS		\$
(Balance at the Close of This Period-3A)	\$	\$
LOANS (Balance at the Close of This Period-3B)	\$	\$

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

Joe Clausius

Signature of Candidate or Treasurer



Date:

March 21, 2005

Daytime Phone: 608-244-5066

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**  
**Contributions from Committees**  
**(Transfers-In)**

Complete Committee Name

Friends Of Santiago Roaas

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

Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	Office Use
2/10/05	Building A Better Wisconsin Committee 4868 High Crossing Blvd. Madison, WI 53704 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan ID# 500030	200.00	200.00	
	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan ID#			
	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan ID#			
	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan ID#			
	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan ID#			
	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan ID#			
	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan ID#			
	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan ID#			
	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	Office Use
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan ID#			
SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE		\$ 200.00		
TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES		\$ 200.00		

**DISBURSEMENTS**  
**Contributions To Committees**  
**(Transfers-Out)**

Complete Committee Name

Friends Of Santiago Rosas

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

Date	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	Office Use
2/14/05	Friends Of Bill Clingan 1715 Madison Street Madison, WI 53711 <small>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> ID# <input type="checkbox"/> Local</small>	50.00	50.00	
/ /	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	Office Use
/ /	<small>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> ID#</small> Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	Office Use
/ /	<small>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> ID#</small> Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	Office Use
/ /	<small>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> ID#</small> Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	Office Use
/ /	<small>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> ID#</small> Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	Office Use
/ /	<small>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> ID#</small> Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	Office Use
/ /	<small>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> ID#</small> Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	Office Use
/ /	<small>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> ID#</small> Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	Office Use
/ /	<small>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> ID#</small> Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	Office Use
SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE		\$ 50.00		
TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEE		\$ 50.00		