

**CAMPAIGN FINANCE REPORT  
STATE OF WISCONSIN**

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 Ken Golden*

Street Address

*105 Glen Hwy*

City, State and Zip Code

*Madison, WI 53705*

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 20\_\_     Pre-Primary 20\_\_     Spring     Fall     Special  
 July Continuing 2006     Pre-Election 20\_\_     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	
<b>1. RECEIPTS</b>				
A. Contributions including Loans from Individuals	\$ 0	\$ 0	\$	\$
B. Contributions from Committees (Transfers-In)	\$ 0	\$ 0	\$	\$
C. Other Income and Commercial Loans	\$ 0	\$ 0	\$	\$
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)	\$ 0	\$ 0	\$	\$
<b>2. DISBURSEMENTS</b>				
A. Gross Expenditures	\$ 0	\$ 0	\$	\$
B. Contributions to Committees (Transfers-Out)	\$ 200.00	\$ 200.00	\$	\$
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	\$ 200.00	\$ 200.00	\$	\$

CASH SUMMARY			
Cash Balance Beginning of Report	\$ 2864.79		\$
Total Receipts	\$ 0		\$
Subtotal	\$ 2864.79		\$
Total Disbursements	\$ 200.00		\$
<b>CASH BALANCE END OF REPORT</b>	\$ 2664.79		\$
<b>INCURRED OBLIGATIONS</b> (Balance at the Close of This Period)	\$ 0		\$
<b>LOANS</b> (Balance at the Close of This 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	Signature of Candidate or Treasurer	Date:
<i>Steve Holtzwoy</i>	<i>[Signature]</i>	<i>7/7/06</i>
		Daytime Phone: <i>608 233 6056</i>

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 2-B**

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

Complete Committee Name  
Friends of Ken Golden

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Date	Full Name Mailing Address and ZIP Code	Amount	Calendar Year-To-Date Total	Office Use
1/7/06	Friends of Matt Veldran 5738 Kroncke Drive Madison, WI 53711 Check if: <input type="checkbox"/> In-Kind	200 <sup>00</sup>	200 <sup>00</sup>	
/ /	Full Name Mailing Address and ZIP Code Check if: <input type="checkbox"/> In-Kind			
/ /	Full Name Mailing Address and ZIP Code Check if: <input type="checkbox"/> In-Kind			
/ /	Full Name Mailing Address and ZIP Code Check if: <input type="checkbox"/> In-Kind			
/ /	Full Name Mailing Address and ZIP Code Check if: <input type="checkbox"/> In-Kind			
/ /	Full Name Mailing Address and ZIP Code Check if: <input type="checkbox"/> In-Kind			
/ /	Full Name Mailing Address and ZIP Code Check if: <input type="checkbox"/> In-Kind			
/ /	Full Name Mailing Address and ZIP Code Check if: <input type="checkbox"/> In-Kind			
/ /	Full Name Mailing Address and ZIP Code Check if: <input type="checkbox"/> In-Kind			
/ /	Full Name Mailing Address and ZIP Code Check if: <input type="checkbox"/> In-Kind			
<b>SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE</b>		\$ 200 <sup>00</sup>		
<b>TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES</b>		\$ 200 <sup>00</sup>		