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**CAMPAIGN FINANCE REPORT
 STATE OF WISCONSIN**

Is this report and amendment? YES NO

OFFICE USE ONLY

COMMITTEE IDENTIFICATION

Name of Committee Lauren Chare for City Council
 Street Address 5218 Kevins Way
 City State Zip Madison WI 53714-3412

WSEB ID Number: CFC80

Please check if address is different than previously reported and complete the Campaign Registration Statement on the back of this form

NAME OF REPORT

- January Continuing 2007 Pre-Primary Spring Fall Special Termination Report
 July Continuing 2007 Pre-Election Spring 2007 Fall Special

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

\$100 00

\$100 00

1B. Contributions from Committees (transfers in)

\$0 00

\$0

1C. Other Income and Commercial Loans

\$0 31

\$0 31

TOTAL RECEIPTS (Totals 1A, 1B and 1C)

\$100 31

\$100 31

2. DISBURSEMENTS

2A. Gross expenditures

\$0 00

\$0 00

2B. Contributions to Committees (transfers out)

\$0 00

\$0 00

TOTAL DISBURSEMENTS (Totals 2A and 2B)

\$0 00

\$0 00

CASH SUMMARY

Cash Balance Beginning of Report

316.65

Total Receipts

\$100 31

Subtotal

416.96

Total Disbursements

\$0 00

CASH BALANCE AT END OF REPORT

416.96

INCURRED OBLIGATIONS

\$0 00

(Balance at close of this period 3B)

LOANS (Balance at close of this period 3B)

\$500 00

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Candidate Name or Treasurer

Lauren Chare

Candidate signature or treasurer

Lauren Chare

Date: 3/26/07

Daytime phone 608/224-1292

SCHEDULE 1-A

RECEIPTS
Contributions (Including Loans) From Individuals

Complete Committee Name: Lauren Cnare for City Council

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
2/17/07	Jeffery S. Rosenberg 6801 South Towne Dr. Madison WI 53713-1500	Realtor Midland Realty- STD 6801 South Towne Dr. Madison WI 53713-1500 Check if In-kind <input checked="" type="checkbox"/> Conduit Loan	\$100	\$100 Office Use
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
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 \$100 Office Use
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
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
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
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
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
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE			\$100 00	
TOTAL ITEMIZED CONTRIBUTION			\$100 00	
TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS			\$0	
TOTAL CONTRIBUTIONS FROM INDIVIDUALS			\$100 00	

SCHEDULE 1-C

RECEIPTS
Other Income and Commercial Loans

Complete Committee Name
Lauren Crave for City Council

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
1/31/2007	Summit Credit Union	Interest	.16	
2/28/2007		Interest	.15	
/ /				
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/ /				
SUBTOTAL OTHER INCOME THIS PAGE			\$.31	
TOTAL ITEMIZED OTHER INCOME			\$.31	
TOTAL UNITEMIZED OTHER INCOME \$20 OR LESS			\$ 0	
TOTAL OTHER INCOME			\$.31	

SCHEDULE 3-B

ADDITIONAL DISCLOSURES
Loans
Individual, Committee or Commercial

Complete Committee Name: Lauren Cnare for City Council

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

Date 1/18/05	Full Name, Mailing Address and Zip Code of Loan Source Lauren Cnare & Ralph Russo 5218 Kevins Way Madison WI 53714	Outstanding Balance Beginning of This Period \$500 00	New Loans This Period \$0 00	Cumulative Payments This Period \$0	Outstanding Balance End of This Period \$500 00
List All Endorsers of Guarantors (if any) Self and spouse					
Full Name, Mailing Address and Zip Code of Guarantor Lauren Cnare 5218 Kevins Way Madison WI 53714		Occupation PR Consultant			
		Name and Address of Employer In Other Words 5218 Kevins Way Madison WI 53714			
		Amount Guaranteed Outstanding \$250 00			
Full Name, Mailing Address and Zip Code of Guarantor Ralph Russo 5218 Kevins Way Madison WI 53714		Occupation Cultural Arts Director			
		Name and Address of Employer Wisconsin Union 600 Langdon St Madison WI 53703			
		Amount Guaranteed Outstanding \$250 00			
SUBTOTAL OUTSTANDING LOANS THIS PAGE				\$500 00	
TOTAL OUTSTANDING LOANS				\$500 00	