

**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 Brooks McGroth*

Street Address  
*1036 Rutledge St. #1*

City, State and Zip Code  
*Madison, WI 53703*

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     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	
<b>1. RECEIPTS</b>				
1A. Contributions (Including Loans) from Individuals	\$ -0-	\$ 200	\$	\$
1B. Contributions from Committees (Transfers-In)	\$ -0-	\$ -0-	\$	\$
1C. Other Income and Commercial Loans	\$ -0-	\$ -0-	\$	\$
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)	\$ -0-	\$ 200	\$	\$
<b>2. DISBURSEMENTS</b>				
2A. Gross Expenditures	\$ -0-	\$ 50.10	\$	\$
2B. Contributions to Committees (Transfers-Out)	\$ -0-	\$ -0-	\$	\$
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	\$ -0-	\$ 50.10	\$	\$

**CASH SUMMARY**

Cash Balance Beginning of Report	\$ 249.90	\$
Total Receipts	\$ -0-	\$
Subtotal	\$ 249.90	\$
Total Disbursements	\$ -0-	\$
<b>CASH BALANCE END OF REPORT</b>	\$ 249.90	\$
<b>INCURRED OBLIGATIONS</b> (Balance at the Close of This Period-3A)	\$	\$
<b>LOANS</b> (Balance at the Close of This Period-3B)	\$ 100	\$

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 <i>Brooks McGroth</i>	Signature of Candidate or Treasurer <i>Brooks McGroth</i>	Date: <i>7/20/07</i>
		Daytime Phone: <i>843-1759</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 3-B**

**ADDITIONAL DISCLOSURE**  
Loans  
Individual, Committee or Commercial

Complete Committee Name  
*Friends of Brooks McGrath*

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

Date	Full Name Mailing Address and Zip Code of Loan Source	Outstanding Balance Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Balance End of This Period
/ /	<i>Brooks McGrath</i>	<i>100</i>	<i>0</i>	<i>0</i>	<i>100</i>

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation	Name and Address of Employer	Amount Guaranteed Outstanding
			\$
			\$

Date	Full Name Mailing Address and Zip Code of Loan Source	Outstanding Balance Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Balance End of This Period
/ /					

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation	Name and Address of Employer	Amount Guaranteed Outstanding
			\$
			\$

Date	Full Name Mailing Address and Zip Code of Loan Source	Outstanding Balance Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Balance End of This Period
/ /					

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation	Name and Address of Employer	Amount Guaranteed Outstanding
			\$
			\$

SUBTOTAL OUTSTANDING LOANS THIS PAGE	\$ <i>100</i>
TOTAL OUTSTANDING LOANS	\$ <i>100</i>