

CAMPAIGN FINANCE REPORT			
STATE OF WISCONSIN			
Is this report an Amendment? YES			
<b>COMMITTEE IDENTIFICATION</b>			
Name of Committee		Citizens for Madison's Future	
Address		360 W. Washington Ave., #302	OFFICE USE ONLY
City, State, ZIP		Madison, WI 53703	WSEB # ID
Please check if address is different than previously reported _____			
<b>NAME OF REPORT: January 2008 Continuing</b>			
<b>SUMMARY OF RECEIPTS AND DISBURSEMENTS</b>			
<b>1. RECEIPTS</b>		<b>Column A</b>	<b>Column B</b>
		<b>This Period</b>	<b>YTD</b>
A. Contributions including Loans from Individuals		\$0.00	\$0.00
B. Contributions from Committees (Transfers-In)		\$0.00	\$0.00
C. Other Income and Commercial Loans		\$0	\$0
<b>TOTAL RECEIPTS (Add totals from 1A, 1B, and 1C)</b>		<b>\$0.00</b>	<b>\$0.00</b>
<b>1. DISBURSEMENTS</b>			
A. Gross Expenditures		\$291.48	\$528.48
B. Contributions to Committees (Transfers-Out)		\$0	\$0
<b>TOTAL DISBURSEMENTS (Add totals from 2A and 2B)</b>		<b>\$291.48</b>	<b>\$528.48</b>
<b>CASH SUMMARY</b>			
Cash Balance at Beginning of Report		\$291.48	
Total Receipts		\$0.00	
Subtotal		\$291.48	
Total Disbursements		\$291.48	
<b>CASH BALANCE AT END OF REPORT</b>		<b>\$0.00</b>	
<b>INCURRED OBLIGATIONS (at close of period)</b>		<b>\$0</b>	
<b>LOANS (at close of period)</b>		<b>\$0</b>	
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: Carol Brooks		Date: 2/8/2008	
Signature: <i>Carol Brooks</i>			
Daytime Phone: (608) 251-6010			

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STATE OF WISCONSIN

<b>Disbursements</b>								
		SCHEDULE 2-A	<b>Citizens for Madison's Future</b>				Pg 1 of 1	
<b>Gross Expenditures</b>								
<b>In-Kind</b>	<b>Date</b>	<b>Name</b>	<b>Address</b>	<b>City</b>	<b>ST</b>	<b>Zip</b>	<b>Purpose</b>	<b>Amount</b>
No	8/4/2007	Carol Brooks	360 W. Washington Ave.	Madison	WI	53703	Consulting	\$291.48
							<b>Total expenditures</b>	<b>\$291.48</b>

**SCHEDULE 4**

**TERMINATION REQUEST**

Complete Committee Name  
*Citizens for Madison's Future*

WSEB ID Number

- A committee may terminate its registration and reporting requirements if the committee will no longer receive contributions, make disbursements or incur obligations, and the cash balance and obligations have been reduced to zero.
- Candidates may not terminate prior to the election in which they are participating
- Non-candidate committees registered with the state must pay the \$100 filing fee if they have over \$2500 in total disbursements for the calendar year
- Please read carefully and, if necessary, indicate how residual committee funds have been disposed of or if outstanding loans or obligations have been forgiven Sign and date the termination request at the bottom of this page.
- Make sure the termination box on the cover page of this report is checked.
- Please note: An audit must be completed and all obligations with the Board, including settlement offers, fulfilled before termination can be granted. All records must be maintained until termination is granted.

**DISPOSAL OF RESIDUAL FUNDS**  
 THIS INFORMATION SHOULD ALSO BE INCLUDED ON SCHEDULE 2-A AND/OR 2-B.

Date	Recipient	Amount
8-4-2007	Carol Brooks	\$291.48

**LOAN OR DEBT FORGIVENESS**

*I hereby forgive all personal loans or have assumed responsibility for any and all debts of my campaign committee.*

Date	Endorser, Guarantor, or Creditor	Amount

TERMINATION REQUEST. I hereby request that the committee registration be terminated. I declare that the committee has not incurred any obligations and does not anticipate incurring any. The committee does not anticipate receiving any further contributions or making any disbursements. I further state that the cash balance has been reduced to zero and that all remaining funds have been disposed of in the manner prescribed by law.

*Carol Brooks*  
 \_\_\_\_\_  
 Signature of Candidate or Treasurer

*2-7-08*  
 \_\_\_\_\_  
 Date