

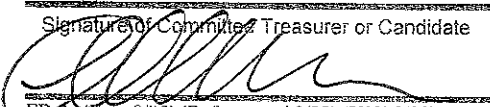
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MADISON CITY CLERK

Campaign Finance Report Short Form EB-2a State Elections Board	W.S.E.B. ID Number
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<input type="checkbox"/> Spring <input type="checkbox"/> Fall <input type="checkbox"/> Special	Pre-Primary _____	<input type="checkbox"/> Continuing Report due Jan 31 _____
<input type="checkbox"/> Spring <input type="checkbox"/> Fall <input type="checkbox"/> Special	Pre-Election _____	<input checked="" type="checkbox"/> Continuing Report due July 20, 2009

Friends of Mike Basford
Name of Candidate or Committee (in full)
1917 Schlimgen Ave.
Address (number and street)
Madison, WI 53704
City, State, Zip

I certify that the above named committee or candidate did not receive contributions or other income make disbursements, or incur obligations during the period covered by this report and that the cash balance remains the same as previously reported This report fulfills filing requirements under Sec. 11.06(9), Stats.

Signature of Committee Treasurer or Candidate 	Date 7-20-09	Daytime Phone 608-513-1387
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