

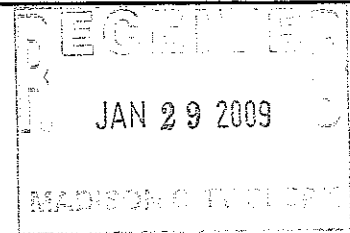
**CAMPAIGN FINANCE REPORT  
STATE OF WISCONSIN**

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 Steve King*  
 Street Address: *6948 Country Lane*  
 City, State and Zip Code: *Madison, WI 53719*



**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 *2009*     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	\$ <i>100-</i>	\$ <i>100-</i>	\$	\$
1B. Contributions from Committees (Transfers-In)	\$ <i>0</i>	\$ <i>0</i>	\$	\$
1C. Other Income and Commercial Loans	\$ <i>0</i>	\$ <i>0</i>	\$	\$
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)	\$ <i>100-</i>	\$ <i>100-</i>	\$	\$
<b>2. DISBURSEMENTS</b>				
2A. Gross Expenditures	\$ <i>0</i>	\$ <i>0</i>	\$	\$
2B. Contributions to Committees (Transfers-Out)	\$ <i>0</i>	\$ <i>0</i>	\$	\$
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	\$ <i>0</i>	\$ <i>0</i>	\$	\$

**CASH SUMMARY**

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

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>Steve King</i>	Signature of Candidate or Treasurer <i>Steven King</i>	Date: <i>1/27/09</i> Daytime Phone: <i>608 235 9868</i>
---	---	--

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

This form is prescribed by the State Elections Board P O Box 2973, Madison, WI 53701-2973, 608-266-8005 Fax:608-267-0500

**Contributions (Including Loans) From Individuals**

Complete Committee Name  
Friends of Steve King

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
12/15/08	Steve King 6948 Country Lane Madison WI 53719	Manager - Meriter 202 S. Park St. Madison WI 53718	100 -	100 -
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan			Office Use
/ /	Full Name Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan			Office Use
/ /	Full Name Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan			Office Use
/ /	Full Name Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan			Office Use
/ /	Full Name Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan			Office Use
/ /	Full Name Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan			Office Use
/ /	Full Name Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan			Office Use

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 100 -
TOTAL ITEMIZED CONTRIBUTIONS	\$ 100 -
TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS	\$ 0
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$ 100 -