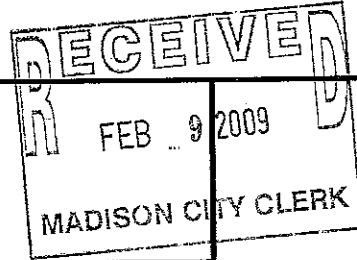


**CAMPAIGN FINANCE REPORT
STATE OF WISCONSIN**



Is this report an Amendment? YES NO

COMMITTEE IDENTIFICATION

Name of Committee Progressive Dane

Address P.O. Box 1222

City, State, ZIP Madison WI 53701

OFFICE USE ONLY

WSEB # IL 300414

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 2009 Spring Fall Special

July Continuing _____ Pre-Election _____ Spring Fall Special

Termination Report
also complete
Schedule 4

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

	Column A This Period	Column B YTD	Audited Totals Office Use Only	
A. Contributions including Loans from Individuals	\$ 508.91	\$ 508.91	\$	\$
B. Contributions from Committees (Transfers-In)	\$ -	\$ -	\$	\$
C. Other Income and Commercial Loans	\$ -	\$ -	\$	\$
TOTAL RECEIPTS (Add totals from 1A, 1B, and 1C)	\$ 508.91	\$ 508.91	\$	\$

1. DISBURSEMENTS

A. Gross Expenditures	\$ 311.53	\$ 311.53	\$	\$
B. Contributions to Committees (Transfers-Out)	\$ 530.00	\$ 530.00	\$	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 841.53	\$ 841.53	\$	\$

CASH SUMMARY

Cash Balance at Beginning of Report	\$ 987.92		\$	
Total Receipts	\$ 508.91		\$	
Subtotal	\$ 1,496.83		\$	
Total Disbursements	\$ 841.53		\$	
CASH BALANCE AT END OF REPORT	\$ 655.30		\$	
INCURRED OBLIGATIONS	\$ -		\$	
(Balance at the Close of This Period 3-A)			\$	
LOANS (Balance at the Close of This Period-3B)	\$ -		\$	

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 Mary T Anglim	Signature of Candidate or Treasurer <i>Mary T Anglim</i>	Date 2/9/2009 Daytime Phone 608-249-0031
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NOTE: The information on this form is required by ss 11 06 11 20 Wis Stats
Failure to provide this information may subject you to the penalties of ss.11 60 11 62 Wisconsin Stats

Contributions (Including Loans) From Individuals

Complete Committee Name
Progressive Dane

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
1/21/2009	Mary Anglim 2134 E Washington Av Madison WI 53704 Check if: <input type="checkbox"/> In-kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan	retired	\$ 50.00	\$ 50.00 Office Use
1/18/2009	Norm Littlejohn 1230 Williamson St Madison WI 53703 Check if: <input type="checkbox"/> In-kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan		\$ 50.00	\$ 50.00 Office Use
1/28/2009	Lukas Diaz 787 Kottke Dr Madison WI 53719 Check if: <input type="checkbox"/> In-kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan		\$ 100.00	\$ 100.00 Office Use
1/31/2009	Joann F. Elder 1112 Grant St Madison WI 53711-2217 Check if: <input type="checkbox"/> In-kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan		\$ 50.00	\$ 50.00 Office Use
1/29/2009	Jeanne M. Gomoll 2825 Union St Madison WI 53704-5136 Check if: <input type="checkbox"/> In-kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan		\$ 40.00	\$ 40.00 Office Use
1/28/2009	Thomas Kozlovsky 1139 Pauline Av Madison WI 53705 Check if: <input type="checkbox"/> In-kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan		\$ 75.00	\$ 75.00 Office Use
1/28/2009	Satya Rhodes-Conway 2642 Hoard St Madison WI 53704 Check if: <input type="checkbox"/> In-kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan		\$ 40.00	\$ 40.00 Office Use
2/2/2009	Arlene Silveira 5760 Barbara Dr Madison WI 53711 Check if: <input type="checkbox"/> In-kind <input type="checkbox"/> Conduit <input type="checkbox"/> Loan		\$ 50.00	\$ 50.00 Office Use
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE			\$ 455.00	
TOTAL ITEMIZED CONTRIBUTIONS				
TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS			\$ -	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS				

Contributions (Including Loans) From Individuals

Complete Committee Name
Progressive Dane

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
1/28/2009	Dace Zeps 3013 Worthington Av Madison WI 53714 Check if: // In-kind // Conduit // Loan	retired	\$ 50.00	\$ 50.00 Office Use
2/2/2009	Mary Anglim 2134 E Washington Av Madison WI 53704 Check if: <input checked="" type="checkbox"/> In-kind // Conduit // Loan		\$ 3.91	\$ 53.91 Office Use
Date	Full Name, Mailing Address and Zip Code Check if: / <input type="checkbox"/> kind // Conduit // Loan	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 Check if: / <input type="checkbox"/> kind // Conduit // Loan	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 Check if: / <input type="checkbox"/> kind // Conduit // Loan	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 Check if: / <input type="checkbox"/> kind // Conduit // Loan	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 Check if: / <input type="checkbox"/> kind // Conduit // Loan	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 Check if: / <input type="checkbox"/> kind // Conduit // Loan	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total Office Use
///	Full Name, Mailing Address and Zip Code Check if: / <input type="checkbox"/> kind // Conduit // Loan	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total Office Use
///	Full Name, Mailing Address and Zip Code Check if: / <input type="checkbox"/> kind // Conduit // Loan	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			\$ 53.91	
TOTAL ITEMIZED CONTRIBUTIONS			\$ 508.91	
TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS			\$ -	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS			\$ 508.91	

Complete Committee Name

Progressive Dane

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

Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount	Office Use
2/2/2009	Mary Anglim 2134 E Washington Av Madison WI 53704 Check if: In-Kind Offset	mailing labels, envelopes	\$ 32.10	
2/1/2009	Government Accountability Board Check if: In-Kind Offset	Filing fee	\$ 100.00	
1/26/2009	Lakeside Press 1334 Williamson St Madison WI 53703 Check if: In-Kind Offset	Printing - fund-raiser invitation	\$ 75.43	
1/23/2009	U S Postal Service Check if: In-Kind Offset	Postage - fund-raiser invitation	\$ 100.09	
/ /				
/ /				
/ /				
/ /				
SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE			\$ 307.62	
TOTAL ITEMIZED EXPENDITURES			\$ -	
TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS			\$ 3.91	
TOTAL EXPENDITURES			\$ 311.53	

**Contributions to Committees
(Transfers-out)**

Complete Committee Name

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

Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-to-Date Total	Office Use
1/30/2009	Friends of Brenda Konkol P.O. Box 1822 Madison, WI 53701-1822 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan ID# <u>local</u>	\$ 250.00	\$ 250.00	
2/2/2009	Katrina 4 District 8 Apt B 2569 University Av Madison WI 53705 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan ID# <u>local</u>	\$ 160.00	\$ 160.00	
1/31/2009	Katrina 4 District 8 Apt B From Government Accountability Board 2569 University Av for Voter File Madison WI 53705 Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan ID# <u>local</u>	\$ 90.00	\$ 250.00	
1/31/2009	Arnold Harris for Town of Cross Plains Board Committee 3427 County Rd P From Government Accountability Board Mount Horeb, WI 53572 for Voter File Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan ID# <u>local</u>	\$ 30.00	\$ 30.00	
/ /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan ID# <u>local</u>	Amount	Calendar Year-to-Date Total	Office Use
/ /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan ID# <u>local</u>	Amount	Calendar Year-to-Date Total	Office Use
/ /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan ID# <u>local</u>	Amount	Calendar Year-to-Date Total	Office Use
/ /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan ID# <u>local</u>	Amount	Calendar Year-to-Date Total	Office Use
SUBTOTAL CONTRIBUTIONS (Transfers-out) THIS PAGE		\$ 530.00		
TOTAL CONTRIBUTIONS (Transfers-out) MADE TO COMMITTEES		\$ 530.00		