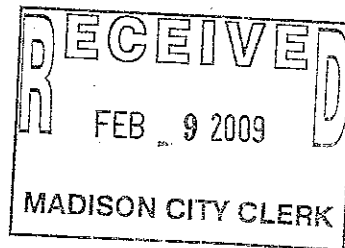


**CAMPAIGN FINANCE REPORT  
STATE OF WISCONSIN**

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 JOE CLAUDIUS*

Street Address

*TIM HEALY, TREASURER; 19 CLARENDON CT.*

City, State and Zip Code

*MADISON, WI 53704*

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 2009     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	\$ 450 <sup>00</sup>	\$ 450 <sup>00</sup>	\$	\$
1B. Contributions from Committees (Transfers-In)	\$ 600 <sup>00</sup>	\$ 600 <sup>00</sup>	\$	\$
1C. Other Income and Commercial Loans	\$ 0	\$ 0	\$	\$
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)	\$ 1,050 <sup>00</sup>	\$ 1,050 <sup>00</sup>	\$	\$
<b>2. DISBURSEMENTS</b>				
2A. Gross Expenditures	\$ 0	\$ 0	\$	\$
2B. Contributions to Committees (Transfers-Out)	\$ 0	\$ 0	\$	\$
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	\$ 0	\$ 0	\$	\$

**CASH SUMMARY**

Cash Balance Beginning of Report	\$ 2,414.12	\$
Total Receipts	\$ 1,050.00	\$
Subtotal	\$ 3,464.12	\$
Total Disbursements	\$ 0	\$
<b>CASH BALANCE END OF REPORT</b>	\$ 3,464.12	\$
<b>INCURRED OBLIGATIONS</b> (Balance at the Close of This Period-3A)	\$ 0	\$
<b>LOANS</b> (Balance at the Close of This Period-3B)	\$ 1,870.00	\$

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	Signature of Candidate or Treasurer	Date:
<i>JOE CLAUDIUS</i>	<i>[Signature]</i>	<i>2-7-2009</i>
		Daytime Phone: <i>608-244-5066</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

Friends of Joe Clausius / District 17 Alderperson

**Campaign Receipt Report: Schedule 1-A**

January 1 to February 2, 2009

Date Received	Name / Address / Zip Code	( Needed If Contribution Is Over \$100.00 )		Type of Receipt				Loan Amount	Dollar Amount of Contribution			Calendar YTD Total
		Occupation	Employer Name / Address	Check	In-Kind	Conduit	Loan		\$20.00 or less	\$20.01 to \$100.00	\$100.01 to \$250.00	
01/13/2009	Terrence Wall PO Box 7700 Madison, WI 53707-7700	Developer	T. Wall Properties, Inc. PO Box 7700 Madison, WI 53707-7700	x							\$ 250.00	\$ 250.00
01/19/2009	Dale A. Nordeen 4206 Yuma Dr Madison, WI 53711-3058	Retired				x					\$ 100.00	\$ 100.00
01/20/2009	Dale A. Nordeen 4206 Yuma Dr Madison, WI 53711-3058	Retired		x							\$ 100.00	\$ 100.00
<b>Total Contributions &amp; Loans</b>								<b>\$</b>	<b>\$</b>	<b>\$ 200.00</b>	<b>\$ 250.00</b>	<b>\$ 450.00</b>

Page 2 of 2

**SCHEDULE 1-B**

**RECEIPTS**  
**Contributions from Committees**  
**(Transfers-In)**

Complete Committee Name  
FRIENDS OF JOE CAUSIUS

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
01/17/09	FRIENDS OF JUDY COMPTON 4001 NAKKOSA TRAIL, STE 200 MADISON, WI 53714 Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan ID# <u>N/A</u>	200 <sup>00</sup>	200 <sup>00</sup>	
01/22/09	DEMOCRATIC PARTY OF DANE CO, PO BOX 2082 MADISON, WI 53701-2082 Check if: <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Loan ID# <u>300032</u>	200 <sup>00</sup>	200 <sup>00</sup>	
01/28/09	WISCONSIN PEOPLE CONFERENCE AFSCME COUNCILS 40448, AFL-CIO 8033 EXCELSIOR DRIVE MADISON, WI 53717-1903 Check if: <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Loan ID# <u>500380</u>	200.00	200.00	
/ /				
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/ /				
/ /				
/ /				
SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE		\$ 600 <sup>00</sup>		
TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES		\$ 600 <sup>00</sup>		

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

Complete Committee Name  
**FRIENDS OF JOE CLARISIL'S**

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
AS OF 2/2/09	JOE CLARISIL'S 18 CLARENDON CT MADISON, WI 53704	1,870 <sup>00</sup>	0	0	1,870 <sup>00</sup>

List All Endorsers or Guarantors (if any)  
**N/A**

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

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
	\$

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
	\$

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

SUBTOTAL OUTSTANDING LOANS THIS PAGE \$ **1,870<sup>00</sup>**  
TOTAL OUTSTANDING LOANS \$ **1,870<sup>00</sup>**