



Complete Committee Name  
Greg For Madison

Instructions for completing schedules are on the back of each schedule

Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation (if year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			

<b>SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE</b>	\$	<u>0.00</u>	<u>0.00</u>
<b>TOTAL ITEMIZED CONTRIBUTIONS</b>	\$	<u>0.00</u>	<u>0.00</u>
<b>TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS</b>	\$	<u>20.00</u>	<u>20.00</u>
<b>TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS</b>	\$	<u>20.00</u>	<u>20.00</u>

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

Complete Committee Name  
*Grey For Madison*

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

Date	Full Name of Committee, Mailing Address and Zip Code	Amount of Contribution
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
<b>SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE</b>		\$ <u>0</u>
<b>TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES</b>		\$ <u>0</u>



Complete Committee Name  
Greg For Madison

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
1/6/21	A Quality S. guns, 4606 Pflaum Rd, Madison, WI 53718 Check if: <input type="checkbox"/> In-Kind Offset	yard signs	295.40
1/7/21	Farm & Fleet, 2202 S. Stoughton Rd, Madison, WI 53716 Check if: <input type="checkbox"/> In-Kind Offset	hand warmers, constituent walk & talk	5.26
1/9/21	GoDaddy.com LLC, 14455 N Hayden Rd Ste 219, Scottsdale AZ 85260 Check if: <input type="checkbox"/> In-Kind Offset	domain registration, gregformadison.com	12.17
1/12/21	Farm & Fleet, see above address Check if: <input type="checkbox"/> In-Kind Offset	AC adapter for GPS batteries recharging, constituent walk & talk	5.26
1/14/21	GoDaddy.com LLC (address above) Check if: <input type="checkbox"/> In-Kind Offset	SSL security certificate	79.99
1/17/21	US Postal Service, 8300 NE Underground, Pillar 210, Kansas City, MO 64144 Check if: <input type="checkbox"/> In-Kind Offset	stamps, constituent mailings	19.30
1/17/21	Costco Wholesale, 2850 Hoepler Rd, Sun Prairie WI 53590 Check if: <input type="checkbox"/> In-Kind Offset	postcards, constituent mailings	17.40
1/19/21	Walmart, 2151 Royal Ave, Monona WI 53713 Check if: <input type="checkbox"/> In-Kind Offset	card stock, constituent mailings	5.24

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 440.02
TOTAL ITEMIZED EXPENDITURES	\$ see pg 2
TOTAL UNITEMIZED EXPENDITURES	\$ see pg 2
TOTAL EXPENDITURES	\$ see pg 2

**SCHEDULE 2-A**

**DISBURSEMENTS  
Gross Expenditures**

Complete Committee Name  
Greg For Madison

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
1/24/21	Walmart (see address page 1)  Check if: <input checked="" type="checkbox"/> In-Kind Offset	color paper, lit drops	5.24
1/31/21	Greg Dixon, 5308 Mather Ave, Madison, WI 53716  Check if: <input checked="" type="checkbox"/> In-Kind Offset	personal auto, mileage reimbursement	69.43
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 74.67
TOTAL ITEMIZED EXPENDITURES	\$ 514.09
TOTAL UNITEMIZED EXPENDITURES	\$ 0.00
TOTAL EXPENDITURES	\$ 514.09

**DISBURSEMENTS**  
**Contributions To Committees**  
**(Transfers-Out)**

Complete Committee Name  
*Greg For Madison*

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

Date	Full Name, Mailing Address and Zip Code	Amount	Y-T-D Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		

**SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE**    \$    0.00    0.00

**TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES**    \$    0.00    0.00

**SCHEDULE 3-A**

**Incurred Obligations Excluding Loans  
ADDITIONAL DISCLOSURE**

Complete Committee Name  
*Greg For Madison*

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

Date	Full Name, Mailing Address and Zip Code of Creditor	Outstanding Balance Beginning This Period	New Obligations or Additions This Period	Cumulative Payments This Period	Outstanding Balance At Close of This Period
/ /					
Nature of Debt (Purpose)					
/ /					
Nature of Debt (Purpose)					
/ /					
Nature of Debt (Purpose)					
/ /					
Nature of Debt (Purpose)					
/ /					
Nature of Debt (Purpose)					
/ /					
Nature of Debt (Purpose)					
/ /					
Nature of Debt (Purpose)					

**SUBTOTAL ITEMIZED OBLIGATIONS THIS PAGE**

\$ 0

**TOTAL ITEMIZED OBLIGATIONS**

\$ 0

**TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS**

\$ 0

**TOTAL INCURRED OBLIGATIONS**

\$ 0

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

Complete Committee Name  
**Greg For Madison**

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

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
/ /					

List All Endorsers or Guarantors (if any)

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

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
/ /					

List All Endorsers or Guarantors (if any)

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

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
/ /					

List All Endorsers or Guarantors (if any)

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

**SUBTOTAL OUTSTANDING LOANS THIS PAGE**

\$ 0

**TOTAL OUTSTANDING LOANS**

\$ 0