CAMPAIGN FINANCE REPORT – LOCAL COMMITTEE STATE OF WISCONSIN

Office Use Only Note: Use of this form is required by the Ethics Commission for reporting campaign finance activity. Completion of this form is mandatory for local committees. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose. **Is this report an amendment?** ☐ Yes ✓ No COMMITTEE IDENTIFICATION Committee Name Friends of Kristin Johnson Mailing Address 510 Piper Drive Madison WI 53711 Daytime Phone 608-516-1637 Email kristinjohnsonfromwi@gmail.com **FILING PERIOD** Report Year 2021 ☐ Special Pre-Primary ☑ January Continuing ☐ Spring Pre-Primary ☐ Fall Pre-Primary Is this a Termination Report? ☐ July Continuing ☐ Spring Pre-Election ☐ September ☐ Special Pre-Election ☐ No ✓ Yes ☐ Fall Pre-Election ☐ Special Post-Election SUMMARY OF MONETARY RECEIPTS AND DISBURSEMENTS Office Use Only **This Period** Year-to-Date **Beginning Cash On-Hand** (15.00)1. Money Received (Receipts) 35.00 1-A. Monetary Contributions from Individuals 1-B. Monetary Contributions from Committees (Transfers-In) \$ 1-C. Other Income and Commercial Loans \$ \$ 35.00 Total Monetary Receipts 2. Money Spent (Disbursements) 2-A. Gross Monetary Expenditures 20.00 2-B. Monetary Contributions to Committees (Transfers-Out) \$ Total Monetary Disbursements 20.00 **Ending Cash On-Hand** SUMMARY OF OUTSTANDING DEBTS \$ 3-A. Incurred Obligations (Unpaid Bills) \$ 3-B. Outstanding Loan Balance certify that I have examined this report and to the best of my knowledge and belief, it is true, correct, and complete.

Income Schedule 1-A

Monetary Contributions from Individuals (Including Loans from Individuals)

Page 2 of 8

Date Name	Address	city	ST Zip	p Occupation	Comments An	nount
8/6/2020 Kristin Johnson	510 Piper Drive	Madison V	VI 5371	53711 Self-employed	\$	20.00
11/18/2020 Kristin Johnson	510 Piper Drive	Madison V	VI 537	53711 Self-employed	G	15.00
TOTAL			•		₩.	35.00

Income Schedule 1-B

Monetary Contributions from Committees (Transfers-In)

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Date NONE Committee Name Address City ST Zip Comments Amount

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Other Income and Commercial Loans

City

ST Zip Reason for Income

Comments

Address

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Amount

NONE

Date

Gross Monetary Expenditures

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Date	Address	City	ST	ST Zip	Purpose	Comments	Amount
07/30/20 Summit Credit Union	4800 American Parkway Madison		W E	WI 53718 Anr	Annual Card Fee	\$ 5.00	
08/31/20 Summit Credit Union	4800 American Parkway Madison		WI !	53718	WI 53718 Analysis bank fee	\$ 5.00	
09/30/20 Summit Credit Union	4800 American Parkway Madison		۱W	53718	WI 53718 Analysis bank fee	\$ 5.00	
10/31/20 Summit Credit Union	4800 American Parkway Madison		N IN	53718	WI 53718 Analysis bank fee	\$ 5.00	
TOTAL						\$ 20.00	

Disbursements Schedule 2-B

Monetary Contributions to Committees (Transfers-Out) ST Zip

Address

City

Comments

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Amount

NONE

Date

Committee Name

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Incurred Obligations Excluding Loans (Unpaid Bills)

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Date NONE Name Address City ST Zip Purpose Outstanding
Balance,
Beginning of
Period New Obligation
This Period Outstanding Balance, Close of Period

Debts	
Schedu	
lle 3-B	

Loans (Personal, Committee, Commercial)

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	Beginning of Amount This Balance, Close Period of Period	Guarantor (if Any) Begii	ST Zip	city	Address	NONE	
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