CAMPAIGN FINANCE REPORT WISCONSIN LOCAL COMMITTEE						
ls this report an Amendment?						
COMMITTEE IDENTIFICATION				The second of th		
Name of Committee Friends of Max Prestigiacomo						
Address 625 Elm Drive, Rm 112						
City, State, ZIP Madison, WI 53706	OFFICE USE ONLY					
Please check if address is different than previously reported		***************************************				
NAME OF REPORT				Spring	Fall	Specia
January - Continuing Sp					Fall	Special
OUMMADY OF DECEMBER AND DISPURCEMENTS	Ι	. I A		Column B	Audited 7	- atala
SUMMARY OF RECEIPTS AND DISBURSEMENTS	4	olumn A s Period		YTD	Office Us	
RECEIPTS A. Contributions including Loans from Individuals	\$	S Periou	\$	680.00	Office 08	e Omy
B. Contributions from Committees (Transfers-In)	\$		\$	223.90		
C. Other Income and Commercial Loans	\$		Ψ	223.30		40
TOTAL RECEIPTS (Add totals from 1A, 1B, and 1C)	\$					1
2. DISBURSEMENTS	ĮΨ	***************************************	L			line .
A. Gross Expenditures	\$	_	\$	(874.87)		100
B. Contributions to Committees (Transfers-Out)	\$	200.00	\$	(200.00)		
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$	200.00	\$	(1,100.01)		
CASH SUMMARY			<u> </u>	(.,,)		
Cash Balance at Beginning of Report	\$	_				
Total Receipts	\$	-				
Subtotal	\$	_				
Total Disbursements						
CASH BALANCE AT END OF REPORT	\$	339.99	\$	339.99		
INCURRED OBLIGATIONS (at close of period)	\$	-				
LOANS (at close of period)	\$	-				
I certify that I have examined this report and to the best of my know	edge ai	nd belief it is	true,	correct and co	mplete.	
Type or Print Name of Candidate or Treasurer	Signatı	re of Candidat	te or]	reasurer	Date	01/14/21
Max Prestigiacomo	Emaîl-	Muy	4	ly .	aytime Phone	608 630-3986
Max Prestigiacomo		Mwf madison@gr	nail.c	•	aytime Phone	608 630-

NOTE: The information on this form is required by ss. 11.0204, 11.0304, 11.0404, 11.0504, 11.0604, 11.0804, 11.0904, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.1400, 11.1401, Wis. Stats.

Print the completed report and file with your local clerk or election commission by the filing deadline. ETHCF-2LE (01/16)

SCHEDULE 2-B

Contributions to Committees

IN-KIND	DATE	NAME	Ethics ID#	ADDRESS	CITY	ST	<u>ZIP</u>	AMOUNT	<u>YTI</u>	ח
		Juliana for District 8		1022 W Johnson St.	Madison	WI	53715	\$ 100.00	\$ 100	
		Brandi for Madison		2210 North Rusk Ave			53713	\$ 100.00	\$ 100	1.00
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