

Note: Use of this form is required by the Ethics Commission for reporting no activity in a campaign finance filing period. Completion of this form is mandatory for committees that file on paper. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose.

SECTION A: REGISTRANT INFORMATION				
A1. Name of Committee/Conduit (in full)				
A2. Committee/Conduit ID Number (if applicable)	A3. Email		l. Phone	
A5. Mailing Address	A6. City		A7. State	A8. Zip
AS. Maining Address	Au. City		A7. State	Ao. Zip
SECTION B: REPORT INFORMATION				
B1. Report Type (Choose One) January Continuing Spring Pre-Primary July Continuing Spring Pre-Election	Fall Pre-Primary September Fall Pre-Election	☐ Special Pre- ☐ Special Pre- ☐ Special Post	Election	B2. Special Election Date (if applicable)
Reporting Period The start date for your campaign finance report should be the day following the end date of your previous campaign finance. Example: If your previous report had a start date of January 1 and an end date of June 30, this report should have a start date of July 1.		B3. Reporting Period Start Date B4. Reporting Period End Date		
Review the filing calendar with reporting periods online at: https://Ethics.wi.gov/FilingCalendar				
Party and Legislative Campaign Committees Only B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One)				
General Fund Segregated Fund				
SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL)				
Filing Exemption Registrants that will not accept contributions, make disbursements aggregate amount of more than \$2,000 in a calendar year are elig campaign finance reports. Exempt status is effective only for the capranted. Registrants wishing to remain on exempt status must rene not claim exemption in the year of their election before the day the	C1. Exemption Request and Affirmation Yes, this registrant is eligible for a filing exemption and would like to request an exemption for this calendar year. No, this registrant is not requesting exemption			
SECTION D: CERTIFICATION				
I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3)(d).				
Authorized Representative D1. Printed Name D2.	Signature		1	D2 Data
D1. Frinted Name D2.	. Signature Zach Wood	d		D3. Date