

CAMPAIGN FINANCE REPORT—STATEMENT OF NO ACTIVITY

STATE OF WISCONSIN

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) Friends of Charles Myadze				
A2. Committee/Conduit ID Number (if applicable) A3. Email A4.			Phone	
A 5 M 2: A 1)		melissa@mmulliken.com (608		
A5. Mailing Address 1509 Drewry Lane	A6. City Madison	Madison		A8. Zip 53704
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SECTION B: REPORT INFORMATION				
B1. Report Type (Choose One) January Continuing July Continuing Spring Pre-Prima Spring Pre-Electi	_	Special Pre-	Election -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. Review the filing calendar with reporting periods online at: https://Ethics.wi.gov/FilingCalendar 12/31/2021				
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)				
aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is calendar year.			est and Affirmation In the self-gibble for a filing exemption In request an exemption for this It 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			D3. Date
Melissa Mulliken				1/18/22