	N FINANCE REPORT MITTEES OF WISCO		DE	ECE EN
Is This Report an Amendment: Yes	□ No		_ 14	JAN 3 5 2023
Instructions for completing schedules are on the ba	ck of each schedule.	1.46.10		land !
COMMITTEE IDENTIFICATION	T		[MADI	SON CITY CLEDIS
Name of Committee  Amato For Madison  Street Address	Part to	Arrell T	grade c	MILITA
Amato For Madison  Street Address  64 Oak Creek Trail  City, State and Zip Code	213 Hay me	17 Acres 17	OF	FICE USE ONLY
Madison, W1. 53	7/7			1
Please check if address is different than previously reported, a	nd complete the Campaign Reg	gistration State	ement in the b	oack of this form.
NAME OF REPORT				
January Continuing 2023 Pre-Primary  July Continuing 1012-31-21  September Continuing Pre-Election	Spring I	Fall	Special	Termination Report also complete Schedule 4
SUMMARY OF RECEIPTS AND DISBURSEMENTS	Column A This Period	Colur Cale		i .
1. RECEIPTS	*	Year-T	o-Date	£
1A. Contributions (Including Loans) from Individuals	\$ 7,000.00	\$ 7,00	0.00	
1B. Contributions from Committees (Transfers-In)	\$ -	\$ -	7	
1C. Other Income and Commercial Loans	\$	\$ -	,	
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 7,000.00	\$ 7,00	0.00	0 2
2. DISBURSEMENTS				
2A. Gross Expenditures	\$ 84.70	\$	84.70	i
2B. Contributions to Committees (Transfers-Out)	\$	\$ -	-	,
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 84.70	\$	84.70	9
CASH SUMMARY			1, 1	74
Cash Balance Beginning of Report	\$ 678.75			
Total Receipts Personal Loan	\$ 7,000.00			
Subtotal	\$ 7,678.95			
Total Disbursements Bank Fees	\$ 84.70			
CASH BALANCE END OF REPORT	\$ 7,594.05			
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$			
LOANS (Balance at the Close of This Period-3B)	\$			
I certify that I have examined this report and to the best of		s true, correct	and comple	ete.
Type or Print Name of Candidate or Treasurer Si	gnature of Candidate or Treasurer	// \/	Date	77

Type or Print Name of Candidate or Treasurer	Signature of Candidate or Treasurer	Date: 1-25-23
Hutrary of 1+ma 10	Email nama to @ Cwag.org	Daytime Phone: 608 · S14 · 3317

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.

SCHEDUI	$=$ 1 $\Delta$	RECEIPTS Iding Loans) From Individuals	F	Page _2_ of
Complete Comm	Amato For Madison			
Date	r completing schedules are on the back of each sc Full Name, Mailing Address and Zip Code Of Contributor	nedule.   Occupation (if year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
12-28-22	Anthony J. Amato 64 Oak Creek Ton! Madison, W1. 53717  Check if: In-Kind Toan Conduit - Ethics ID#	Part-time UW-System Adjunct Professor UW-Malteville:	\$7,000.	47,000.
	Check if: In-Kind Loan Conduit – Ethics ID#			
	Check if: ☐ In-Kind ☐ Loan☐ Conduit – Ethics ID#			
	Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#			,
	66.48 02.30			
	67.43			
	Check if:			

Check if: ☐ In-Kind ☐ Loan Conduit – Ethics ID#

Check if: In-Kind Loan

Conduit – Ethics ID#		
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 70000	7000.00
TOTAL ITEMIZED CONTRIBUTIONS	\$ 	L. and Hilly
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$ -	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$	

SCHEDULE 1-B

# RECEIPTS Contributions from Committees (Transfers-In)

Page 3 of

Complete Committee Name
Amato For Madisoni
Nove-

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

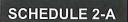
Date	Full Name of Committee, Mailing Address and Zip Code	Amount of Contribution
	Check if:	
	Check if:	
	Check if:	
	Check if:	
	Check if:	
	Check if: ☐ In-Kind ☐ Loan	
	Check if: ☐ In-Kind ☐ Loan	
	Check if: ☐ In-Kind ☐ Loan  Check if: ☐ In-Kind ☐ Loan	
)	SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE	\$
	TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES	\$

#### SCHEDULE 1-C

### RECEIPTS Other Income and Commercial Loans



Complete Con	Amato For Madiso	None	
Instructions t	or completing schedules are on the back of each schedules	tule	
Date	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
£			
		SUBTOTAL OTHER INCOME THIS PAGE	\$
		TOTAL ITEMIZED OTHER INCOME	\$
		TOTAL OTHER INCOME	\$



### DISBURSEMENTS Gross Expenditures

Page 5 of \_\_\_

Complete Committee Name

Instructions for completing schedules are on the back of each schedule. Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount Of Person or Business to Whom Payment is Made Park Bank - Old Sauk Branch P.O. Bux 8969 Madison, WI. 53708 July 1st Amato For Madison Checking Account 12-31-22 Check if: In-Kind Offset SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE TOTAL ITEMIZED EXPENDITURES TOTAL UNITEMIZED EXPENDITURES TOTAL EXPENDITURES | \$

SCHEDULE 2-B

## DISBURSEMENTS Contributions To Committees (Transfers-Out)



Complete Committee Name

Amato 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
127.43	The same of the sa		
		98	
	Check if: In-Kind Loan		
	Check if:  In-Kind  Loan	/	
	Check if:  In-Kind  Loan		
	Check if:  In-Kind  Loan		
	Check if:  In-Kind  Loan		
	Check if:  In-Kind  Loan		
		100	
	Check if:		
	Check if:  In-Kind  Loan		
	Check if:		
	SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE	¢	
	SUBTUTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE	\$	
	TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES	\$	