

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.

Office Use Only

Is this report an amendment? Yes No

COMMITTEE IDENTIFICATION			
Committee Name	Lindsay for Alder		
Mailing Address	5405 Sudbury Way, Madison, WI 53714		
Email	lindsay@lindsaylemmer.com	Daytime Phone	608-217-5217

FILING PERIOD			
<input type="checkbox"/> January Continuing	<input type="checkbox"/> Spring Pre-Primary	<input type="checkbox"/> Fall Pre-Primary	<input type="checkbox"/> Special Pre-Primary
<input checked="" type="checkbox"/> July Continuing	<input type="checkbox"/> Spring Pre-Election	<input type="checkbox"/> September	<input type="checkbox"/> Special Pre-Election
	<input type="checkbox"/> Fall Pre-Election	<input type="checkbox"/> Special Post-Election	
Report Year			2023
Is this a Termination Report?			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

SUMMARY OF MONETARY RECEIPTS AND DISBURSEMENTS			
	This Period	Year-to-Date	<i>Office Use Only</i>
Beginning Cash On-Hand	\$ 97.42		
1. Money Received (Receipts)			
1-A. Monetary Contributions from Individuals			
1-B. Monetary Contributions from Committees (Transfers-In)			
1-C. Other Income and Commercial Loans			
<i>Total Monetary Receipts</i>	\$ -	\$ -	
2. Money Spent (Disbursements)			
2-A. Gross Monetary Expenditures	\$ 97.42		
2-B. Monetary Contributions to Committees (Transfers-Out)			
<i>Total Monetary Disbursements</i>		\$ -	
Ending Cash On-Hand	\$ -		

SUMMARY OF OUTSTANDING DEBTS			
3-A. Incurred Obligations (Unpaid Bills)	\$ -		
3-B. Outstanding Loan Balance	\$ -		

I certify that I have examined this report and to the best of my knowledge and belief, it is true, correct, and complete.

Signature of the candidate or treasurer	Print Name Lindsay Lemmer	Date 7-17-23
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Monetary Contributions from Individuals (Including Loans from Individuals)

Conduit?	Date	Name	Address	City	ST	Zip	Occupation
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Monetary Contributions from Individuals (Including Loans from Individuals)

Comments	Amount
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Monetary Contributions from Committees (Transfers-In)

Date	Committee Name	Address	City	ST	Zip	Comments	Amount
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Other Income and Commercial Loans

Date	Name	Address	City	ST	Zip	Reason for Income	Comments	Amount
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Gross Monetary Expenditures

Date	Name	Address	City	ST	Zip	Purpose	Comments
4/26/23	Lindsay Lemmer	5405 Sudbury Way	Madison	WI	53714	partial loan repayment	

Gross Monetary Expenditures

Amount

97.42

Gross Monetary Expenditures

4E+08	3/28/21							lindsay-lem
4E+08	3/28/21	8402 Excelsior Drive	Madison	WI		53705 United States		coffeewithn
4E+08	3/28/21							lindsay-lem
4E+08	3/28/21							coffeewithn
4E+08	3/28/21							coffeewithn
4E+08	3/28/21							coffeewithn
4E+08	4/4/21	1210 W. Dayton St.	Madison	WI		53706 United States		lindsay-lem
4E+08	5/2/21	1210 W. Dayton St.	Madison	WI		53706 United States		lindsay-lem
4E+08	6/6/21	1210 W. Dayton St.	Madison	WI		53706 United States		lindsay-lem
4E+08	7/4/21	1210 W. Dayton St.	Madison	WI		53706 United States		lindsay-lem

Gross Monetary Expenditures

3.82E+08	Lindsay Le	73647
3.83E+08	Lindsay Le	73647
3.87E+08	Lindsay Le	73647
3.92E+08	Lindsay Le	73647
3.97E+08	Lindsay Le	73647

Gross Monetary Expenditures

f	2.34E+08	#####	1297025	#####	0.99
f	2.35E+08	#####	1297025	#####	1.98
f	2.35E+08	#####	1297025	#####	3.95
f	2.35E+08	#####	1297025	#####	0.99
f	2.35E+08	#####	1297025	#####	0.79
f	2.35E+08	#####	1297025	#####	0.99
f	2.35E+08	#####	1297025	#####	0.4
f	2.36E+08	#####	1304684	#####	0.99
f	2.38E+08	#####	1321875	#####	0.99
f	2.41E+08	#####	1343730	#####	0.99
f	2.44E+08	#####	1364934	#####	0.99

Monetary Contributions to Committees (Transfers-Out)

Date	Committee Name	Address	City	ST	Zip	Comments	Amount
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Incurred Obligations Excluding Loans (Unpaid Bills)

Date	Name	Address	City	ST	Zip	Purpose	Outstanding Balance, Beginning of Period	New Obligation This Period	Outstanding Balance, Close of Period
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Loans (Personal, Committee, Commercial)

Date	Name	Address	City	ST	Zip	Guarantor (if Any)	Outstanding Balance, Beginning of Period	New Loan Amount This Period	Outstanding Balance, Close of Period
	Lindsay Lemmer	310 Main St	Santa Cruz	CA	95060		\$ 5,025.00		\$ 4,927.58

TERMINATION REQUEST

Complete Committee Name

Ethics ID Number

- A committee may terminate its registration and reporting requirements if the committee will no longer receive contributions, make disbursements or incur obligations, and the cash balance and obligations have been reduced to zero.
- Candidates may not terminate prior to the election in which they are participating.
- Non-candidate committees registered with the state must pay the \$100 filing fee if they have over \$2,500 in total expenses for the calendar year.
- Please read carefully and, if necessary, indicate how residual committee funds have been disposed of or if outstanding loans or obligations have been forgiven. Sign and date the termination request at the bottom of this page.
- If you have any transactions since your last report (other than final distribution of funds, or loan forgiveness), be sure to complete the full finance report. (ETHCF-2)
- Please note: An audit must be completed and all obligations with the Board, including settlement offers, fulfilled before termination can be granted. All records must be maintained until 3 years after the date of an election in which the registrant participates, even if termination is granted. (Per Wis. Stats. 11.0201(4), 11.0301(4), 11.0401(4), 11.0501(4), 11.0601(4), 11.0801(4), 11.0901(4))

DISPOSAL OF RESIDUAL FUNDS

THIS INFORMATION SHOULD ALSO BE INCLUDED ON SCHEDULE 2-A AND/OR 2-B.

Date	Recipient	Amount

LOAN OR DEBT FORGIVENESS

I hereby forgive all personal loans or have assumed responsibility for any and all debts of my campaign committee.

Date	Endorser, Guarantor, or Creditor	Amount

- This is a non-candidate committee registered with the state and the committee made over \$2,500 in disbursements in the last calendar year. I have paid the \$100 filing fee.
- I do not owe the \$100 filing fee.

Signature of Candidate or Treasurer_____
Date

TERMINATION REQUEST. I hereby request that the committee registration be terminated. I declare that the committee has not incurred any obligations and does not anticipate incurring any. The committee does not anticipate receiving any further contributions or making any disbursements. I further state that the cash balance has been reduced to zero and that all remaining funds have been disposed of in the manner prescribed by law.

NOTE: The information on this form is required by s. 11.0105, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.1400, 11.1401, Wis. Stats.