Note: Use of this form is required by the Ethics Commission for reporting Office Use Only 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. Is this report an amendment? ☐ Yes ☐ No MAR **0 6** 2024 COMMITTEE IDENTIFICATION MADISON CITY CLERK Committee Name Syed for District 12 Mailing Address 709 Highcliff Trl Email syedfordistrict12@gmail.com Daytime Phone 608-572-6984 **FILING PERIOD** ☐ January Continuing ☑ Spring Pre-Primary ☐ Fall Pre-Primary☐ Special Pre-Primary Report Year ☐ July Continuing Is this a Termination Report? ☐ Special Pre-Election ☐ Fall Pre-Election☐ Special Post-Election Yes ☐ No SUMMARY OF MONETARY RECEIPTS AND DISBURSEMENTS Office Use Only This Period Year-to-Date **Beginning Cash On-Hand** 654.83 1. Money Received (Receipts) 1-A. Monetary Contributions from Individuals 1-B. Monetary Contributions from Committees (Transfers \$ 1-C. Other Income and Commercial Loans Total Monetary Receipts \$ 2. Money Spent (Disbursements) 2-A. Gross Monetary Expenditures \$ 2-B. Monetary Contributions to Committees (Transfers-O \$ 654.83 Total Monetary Disbursements 654.83 **Ending Cash On-Hand** SUMMARY OF OUTSTANDING DEBTS 3-A. Incurred Obligations (Unpaid Bills) \$ \$ 3-B. Outstanding Loan Balance I certify that Mave examined this report and to the best of my knowledge and belief, it is true, correct, and complete. Syed Abbas 3/6/2024 Signature of the candidate or treasurer Print Name Date

Disbursements Schedule 2-B	Monetary Contributions to	intributions to Committees (Transfers-Out)	Fransfe	rs-Out) Page 1 of	1 of 1
Date Committee Name	Address	City	ST	Zip Comments A	mount
1/15/2024 Friends of Syed Abbas	709 highcliff Trl	Madison	IM	53718 \$	654.83

Disbursements Schedule 2-B

Complete Committee Name	Ethics ID Number
Syed for District 12	

- 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 RESIDUA THIS INFORMATION SHO	AL FUNDS OULD AŁSO BE INCLUDED ON SCHEDULE 2-A AND/OR 2-B.	
Date	Recipient	Amount
03-06-2024	Friends of Sted AbBAS	654.83

LOAN OR DEBT FORGI	VENESS	
I hereby forgive all person	al loans or have assumed responsibility for any and all debts of my campaigi	n committee.
Date	Endorser, Guarantor, or Creditor	Amount

\neg	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

03-06-2024

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.