

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	ON			
A1. Name of Committee/Conduit (in full)		,		
Friends of Barbara McKinney				
A2. Committee/Conduit ID Number (if applicable) A3. Email		A4. Phone		
	info@wags.net		608-213-1173	
A5. Mailing Address	A6. City		A7. State A8. Zip	
1209 Dayflower Drive	Madison		WI	53719
SECTION B: REPORT INFORMATION	Company of the State of the Sta			
B1. Report Type (Choose One) January Continuing Spring Pre-Primary July Continuing Spring Pre-Election	Fall Pre-Primary September Fall Pre-Election	Special Special	Pre-Primary Pre-Election Post-Election	B2. Special Election Date (if applicable)
Reporting Period The start date for your campaign finance report should be the day for previous campaign finance. Example: If your previous report had a an end date of June 30, this report should have a start date of July 1	B3. Reporting Period Start Date Jamay 1, 2024 B4. Reporting Period End Date			
Review the filing calendar with reporting periods online at: https://l	June 3, 2024			
Party and Legislative Campaign Committees Only				
B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One) General Fund				
SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL)				
Filing Exemption Registrants which do not anticipate accepting or making contribution	C1. Exemption Request and Affirmation			
incurring obligations in an aggregate amount exceeding \$2,500 in	☐ Yes, this registrant is eligible for exemption.			
exemption from filing campaign finance reports. This exemption applies until the registrant exceeds the \$2,500 aggregate activity threshold, amends its registration, or is terminated.		No, this registrant is not requesting exemption		
	No, this registrant is not requesting exemption			
				,
SECTION D: CERTIFICATION				
I certify that the above named registrant has not engaged in any find the same as previously reported. This report fulfills the requirement.			report and that the	cash balance remains
Authorized Representative				
DI. Printed Name Aaron J. Backer, Treasurer D2. 8	Signature AA		an old	D3. Date 8/9/2024
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Form: CF-2NA (Rev. 01/2023). Prescribed by: STATE OF WISCONSIN. Ethics Commission				

MADISON CITY CLERK