

<p><b>Note:</b> 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.</p> <p style="text-align: center;"><b>Is this report an amendment?</b></p>	<p><i>Office Use Only</i></p>
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COMMITTEE IDENTIFICATION			
Committee Name	Friends of Rich Williams		
Mailing Address	1706 Waterbend Dr Verona WI 53593		
Email	dcwilliams555@gmail.com	Daytime Phone	608-770-1432

FILING PERIOD			
Jan-June 2024		Report Year	2024
		Yes	

SUMMARY OF MONETARY RECEIPTS AND DISBURSEMENTS			
	This Period	Year-to-Date	<i>Office Use Only</i>
<b>Beginning Cash On-Hand</b>	\$ 623.79		
<b>1. Money Received (Receipts)</b>			
1-A. Monetary Contributions from Individuals	\$ -		
1-B. Monetary Contributions from Committees (Transfers-In)	\$ -		
1-C. Other Income and Commercial Loans	\$ 0.01		
<i>Total Monetary Receipts</i>	\$ 0.01	\$ 0.01	
<b>2. Money Spent (Disbursements)</b>			
2-A. Gross Monetary Expenditures	\$ -		
2-B. Monetary Contributions to Committees (Transfers-Out)	\$ -		
<i>Total Monetary Disbursements</i>	\$ 623.80	\$ 623.80	
<b>Ending Cash On-Hand</b>	\$ <del>0</del> -		

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.*

Deborah Williams

Deborah Williams

7/7/2024

Signature of the candidate or treasurer

Print Name

Date



TERMINATION REQUEST

Complete Committee Name  
**Friends of Rich Williams**

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
3/6/2024	Leukemia and Lymphoma Society	\$623.80

**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

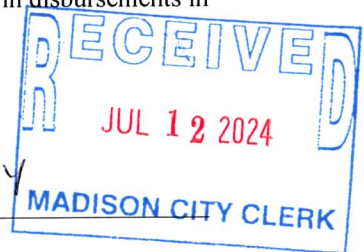
This is a non-candidate committee registered with the state and the committee made over \$2,500 in disbursements in the last calendar year. I have paid the \$100 filing fee.

I do not owe the \$100 filing fee.

*[Handwritten Signature]*

Signature of Candidate or Treasurer

7/12/24  
 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.