CAMPAIGN FINANCE REPOR WISCONSIN LOCAL COMMITT			y marak			
Is this report an Amendment?		ES NOX				
COMMITTEE IDENTIFICATION					1	
Name of Committee Friends of Denise DeMarb						
Address 6326 Maywick Drive #204						
City, State, ZIP Madison, WI 53718					OFFICE USE ON	LY
Please check if address is different than previously reported						
NAME OF REPORT Jan Fall				Spring	g Fall	Special
July_X Continuing				Spring	g Fall	Special
September 20 Continuing						
SUMMARY OF RECEIPTS AND DISBURSEMENTS	A .	Column A		Column B	Audited Totals	
1. RECEIPTS	1	This Period		YTD	Office Use Only	
A. Contributions including Loans from Individuals	\$	-				
B. Contributions from Committees (Transfers-In)	\$	_	\$	_		
C. Other Income and Commercial Loans	\$	_	\$	-		
TOTAL RECEIPTS (Add totals from 1A, 1B, and 1C)	\$	_				
2. DISBURSEMENTS						
A. Gross Expenditures	\$	_				
B. Contributions to Committees (Transfers-Out)	\$	-				
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$	_				
CASH SUMMARY						
Cash Balance at Beginning of Report	\$	914.96				
Total Receipts	\$	-				
Subtotal	\$	914.96				
Total Disbursements	\$	_				
CASH BALANCE AT END OF REPORT	\$	914.96				
INCURRED OBLIGATIONS (at close of period)	\$	-				
LOANS (at close of period)	\$	-				
I certify that I have examined this report and to the best of my knowl	ledge	and belief it is tru	e, co	rrect and comple	te.	
Type or Print Name of Candidate or Treasurer	Signa	ature of Candidate or			Date 7	/14/2019
Joan H. Dickrell Treasurer for Denise DeMarb District 16	Emai	ı H. Dickrell I krell@charter.r	nek	Joan 7 (.)	Daytime Phone 608	-345-670

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.

Print the completed report and file with your local clerk or election commission by the filing deadline. ETHCF-2LE (01/16)