

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 INFORMATI	ON			
A1. Name of Committee/Conduit (in full)	de of 1	nadison		
A2. Committee/Conduit ID Number (if applicable)	A3. Email Friendis Fradish	wip Smail. 60 wip Scom 60	Phone 8-352	-8178
2858 University Are, #245	A6 City		A7. State	A8. Zip 53703
SECTION B: REPORT INFORMATION				
B1. Report Type (Choose One) January Continuing Spring Pre-Primary July Continuing Spring Pre-Election	Fall Pre-Primary September Fall Pre-Election	Special Pre-Prescription Special Pre-Error Special Post-I	lection	B2. Special Election Date (if applicable)
Reporting Period The start date for your campaign finance report should be the day previous campaign finance. Example: If your previous report had an end date of June 30, this report should have a start date of July Review the filing calendar with reporting periods online at: littps:	B3. Reporting Period Start Date			
Party and Legislative Campaign Committees Only B5. Is This Report for Your General Fund or Segregated Fund General Fund Segregated Fund SECTION C: LIMITED ACTIVITY REPO		(OPTIONAL)		
Filing Exemption Registrants which do not anticipate accepting or making contribution incurring obligations in an aggregate amount exceeding \$2,500 exemption from filing campaign finance reports. This exemption exceeds the \$2,500 aggregate activity threshold, amends its register.	utions, making disbursements, or in a calendar year may claim an tion applies until the registrant	C1. Exemption Reques	nt is eligible	for exemption.
SECTION D: CERTIFICATION .				
I certify that the above named registrant has not engaged in any the same as previously reported. This report fulfills the requirem	financial transactions during the pents under Wis. STAT. § 11.0103(3	period covered by this reposit (d).	ort and that t	he cash balance remains
Authorized Representative D1. Printed Name D MGR Goundarajan	2. Signature /S/MGR	ovihdaraja.	~	7/28/25