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

A1. Name of Committee/Conduit (in full)

Madison For Madison

A2. Committee/Conduit ID Number (if applicable)	A3. Email	A4. Phone	
	Madisonformadison@gmail.com	608 403 5665	
A5. Mailing Address	**A6. City**	**A7. State**	**A8. Zip**
5022 American Parkway 431	Madison	Wi	53718

SECTION B: REPORT INFORMATION

B1. Report Type (Choose One)

- ☐ January Continuing
- ☒ July Continuing
- ☐ Spring Pre-Primary
- ☐ Spring Pre-Election
- ☐ Fall Pre-Primary
- ☐ September
- ☐ Fall Pre-Election
- ☐ Special Pre-Primary
- ☐ Special Pre-Election
- ☐ Special Post-Election

B2. Special Election Date (if applicable)

Reporting Period

The start date for your campaign finance report should be the day following the end date of your previous campaign finance. Example: If your previous report had a start date of January 1 and an end date of June 30, this report should have a start date of July 1.

Review the filing calendar with reporting periods online at: https://Ethics.wi.gov/FilingCalendar

B3. Reporting Period Start Date

1/1/26 -

B4. Reporting Period End Date

6/30/26

Party and Legislative Campaign Committees Only

B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One)

- ☐ General Fund
- ☐ Segregated Fund

SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL)

Filing Exemption

Registrants which do not anticipate accepting or making contributions, making disbursements, or incurring obligations in an aggregate amount exceeding $2,500 in a calendar year may claim an 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.

C1. Exemption Request and Affirmation

- ☒ Yes, this registrant is eligible for exemption.
- ☐ No, this registrant is not requesting exemption

SECTION D: CERTIFICATION

I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3)(a).

Authorized Representative

D1. Printed Name	D2. Signature	D3. Date
Sabrina Madison	Sabrina Madison	7-15-26