

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

Is This Report an Amendment: ☐ Yes ☒ No

Instructions for completing schedules are on the back of each schedule.

COMMITTEE IDENTIFICATION

Name of Committee

Vote Kim Richman

Street Address

1313 Droster Road

City, State and Zip Code

Madison, WI 53716

OFFICE USE ONLY

Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form. ☐

NAME OF REPORT

☐ January Continuing _____

☐ Pre-Primary _____

☒ July Continuing **2025**

☐ Spring

☐ Fall

☐ Special

☐ September Continuing _____

☐ Pre-Election _____

☐ Termination Report
attach CF-13,
Termination Request

**SUMMARY OF RECEIPTS AND
DISBURSEMENTS**

1. RECEIPTS

	Column A This Period	Column B Calendar Year-To-Date
1A. Contributions (Including Loans) from Individuals	\$ 1179.70	\$ 7288.70
1B. Contributions from Committees (Transfers-In)	\$	\$ 400.00
1C. Other Income and Commercial Loans	\$	\$
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 1179.70	\$ 7688.70

2. DISBURSEMENTS

2A. Gross Expenditures	\$ 1650.00	\$ 7613.57
2B. Contributions to Committees (Transfers-Out)	\$	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 1650.00	\$ 7613.57

CASH SUMMARY

Cash Balance Beginning of Report	\$ 545.43
Total Receipts	\$ 1179.70
Subtotal	\$ 1725.13
Total Disbursements	\$ 1650.00
CASH BALANCE END OF REPORT	\$ 75.13
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$
LOANS (Balance at the Close of This Period-3B)	\$

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer

Kim I. Richman

Signature of Candidate or Treasurer

Kim I. Richman

Email krichman@pm.me

Date: 07/07/2025

VoteKimRichman@gmail.com

Daytime Phone: 608-444-1302

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.

Complete Committee Name

Vote Kim Richman

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Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation (if year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
03/20/2025	Judy Duncan 11 White Oak La. Madison, WI 53711 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____		100.00	100.00
03/24/2025	Steven Hufton 1096 Perry Center Rd. Mt. Horeb, WI 53572 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____	Retired	479.70	479.70
03/24/2025	Sandra Hufton 1096 Perry Center Rd. Mt. Horeb, WI 53572 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____	Interior Designer	500.00	500.00
03/25/2025	Kim I. Richman 1313 Droster Road Madison, WI 53716 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____		100.00	3144.00
	 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
	 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
	 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE			\$ 1179.70	
TOTAL ITEMIZED CONTRIBUTIONS			\$	
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS			\$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS			\$ 1179.70	

SCHEDULE 2-A
DISBURSEMENTS
Gross Expenditures

Page 1 of 1

Complete Committee Name
Vote Kim Richman

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Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
03/26/2025	North By Nine 8102 Radcliff Dr. Colorado Springs, CO 80920 Check if: <input type="checkbox"/> In-Kind Offset	Data & Consulting	1650.00
	 Check if: <input type="checkbox"/> In-Kind Offset		
	 Check if: <input type="checkbox"/> In-Kind Offset		
	 Check if: <input type="checkbox"/> In-Kind Offset		
	 Check if: <input type="checkbox"/> In-Kind Offset		
	 Check if: <input type="checkbox"/> In-Kind Offset		
	 Check if: <input type="checkbox"/> In-Kind Offset		
	 Check if: <input type="checkbox"/> In-Kind Offset		

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE \$ 1650.00

TOTAL ITEMIZED EXPENDITURES \$

TOTAL UNITEMIZED EXPENDITURES \$

TOTAL EXPENDITURES \$ 1650.00