CAMPAIGN FINANCE REPORT WISCONSIN LOCAL COMMITTEE

Is this report an Amendment?

YE\$

MADISON CITY CLER

OFFICE USE ONLY

lease check if address is different than previously reported

AME OF REPORT

lame of Committee

ddress

ity, State, ZIP

OMMITTEE IDENTIFICATION

Jan 2019 Continuing

Friends of Skidmore

13 Red Maple trail

Madison, WI 53717

Spring

UMMARY OF RECEIPTS AND DISBURSEMENTS	C	olumn A	C	olumn B	Audited Totals						
RECEIPTS] TI	nis Period		YTD	Office Use Only						
A. Contributions including Loans from Individuals	\$										
B. Contributions from Committees (Transfers-In)	\$	_	\$	400.00	1. 建建家						
C. Other Income and Commercial Loans	\$	-									
OTAL RECEIPTS (Add totals from 1A, 1B, and 1C)	\$	-	\$	400.00	******						
. DISBURSEMENTS	" "			1 1111							
A. Gross Expenditures	\$	58.00	\$	76.00							
B. Contributions to Committees (Transfers-Out)	\$	_			7	Augusta Pan Jawa					
OTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$	58.00	\$	76.00	785						
ASH SUMMARY											
ash Balance at Beginning of Report	\$	1,227.32									
otal Receipts	\$				- 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
Subtotal	\$	1,227.32									
otal Disbursements	\$	58.00									
ASH BALANCE AT END OF REPORT	\$	1,169.32]								
NCURRED OBLIGATIONS (at close of period)	\$				10 - 10 A A 10 A A	9.04%(2 <mark>.</mark>					
OANS (at close of period)	\$	_									

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

ype or Print Name of Candidate or Treasurer

²aul Skidmore

Candidate and Treasurer)

Signature of Candidate or Treasyre/

3/24/19

Email: paulskidmore@tds.net

Daytime Phone: (608) 335-1529

VOTE: 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. isfure 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)

SCHEDULE 2-A

Gross Expenditures

AMOUNT	8.00																	
PURPOSE	\$3 Monthly fee x 2																	
ZIP																		
ST	M			1														
CITY	Madison													,				
ADDRESS																		
NAME	NOMO																	
DATE	ind of footh																	
CHIX-NI																		