

**CAMPAIGN FINANCE REPORT
WISCONSIN LOCAL COMMITTEE**

Is this report an Amendment? YES NO

COMMITTEE IDENTIFICATION

Name of Committee Friends of Savion Castro
 Address 618 Clemons Ave
 City, State, ZIP Madison, WI 53704

OFFICE USE ONLY

Please check if address is different than previously reported _____

NAME OF REPORT Jan 2021 Continuing Pre-Primary 20__ Spring Fall Special
 July 20__ Continuing Pre-election 20__ Spring Fall Special
 September 20__ Continuing

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

| | Column A This Period | Column B YTD | Audited Totals Office Use Only | |
|--------------------------------------------------------|-------------------------|-----------------|-----------------------------------|--|
| A. Contributions including Loans from Individuals | \$ 25.00 | | | |
| B. Contributions from Committees (Transfers-In) | \$ - | | | |
| C. Other Income and Commercial Loans | \$ - | | | |
| TOTAL RECEIPTS (Add totals from 1A, 1B, and 1C) | \$ 25.00 | \$ - | | |

2. DISBURSEMENTS

| | | | | |
|--------------------------------------------------------|---------|------|--|--|
| A. Gross Expenditures | \$ 0.99 | | | |
| B. Contributions to Committees (Transfers-Out) | \$ - | | | |
| TOTAL DISBURSEMENTS (Add totals from 2A and 2B) | \$ 0.99 | \$ - | | |

CASH SUMMARY

| | | | | |
|--------------------------------------------------|-------------|--|--|--|
| Cash Balance at Beginning of Report | \$ 5,150.27 | | | |
| Total Receipts | \$ 25.00 | | | |
| Subtotal | \$ 5,175.27 | | | |
| Total Disbursements | \$ 0.99 | | | |
| CASH BALANCE AT END OF REPORT | \$ 5,174.28 | | | |
| 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 knowledge and belief it is true, correct and complete.

| | | |
|-------------------------------------------------|-----------------------------------------------------------------------------------------------|----------------|
| Type or Print Name of Candidate Savion J Castro | Signature of Candidate or Savion J Castro | Date 1/15/2021 |
| | Email savion.castro@gmail.com phone 608-800-1994 | |

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)

