

**CAMPAIGN FINANCE REPORT  
WISCONSIN LOCAL COMMITTEE**

Is this report an Amendment?    **YES**    **NO**

**COMMITTEE IDENTIFICATION**

Name of Committee    Ananda Mirelli for Public Schools  
 Address    1027 S. Sunnyvale Lane #A  
 City, State, ZIP    Madison, W 53713

OFFICE USE ONLY

Please check if address is different than previously reported   

**NAME OF REPORT**    Jan 2023 X\_ Continuing    Pre-Primary 20\_\_    Spring    Fall    Special  
                                  **July 2023 X\_ Continuing**    Pre-election 20\_\_    Spring    Fall    Special  
                                  September 22\_\_ 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	\$ -			
B. Contributions from Committees (Transfers-In)	\$ -			
C. Other Income and Commercial Loans	\$ -			
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B, and 1C)	\$ -	\$ -		

**2. DISBURSEMENTS**

A. Gross Expenditures	\$ 60.00			
B. Contributions to Committees (Transfers-Out)				
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	\$ 60.00			

**CASH SUMMARY**

Cash Balance at Beginning of Report	\$ 551.69			
Total Receipts	\$ -			
Subtotal	\$ 551.69			
Total Disbursements	\$ 60.00			
<b>CASH BALANCE AT END OF REPORT</b>	\$ 491.69			
<b>INCURRED OBLIGATIONS</b> (at close of period)	\$ -			
<b>LOANS</b> (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 or Treasurer ananda mirelli	Signature of Candidate or Treasurer ananda mirelli Email <a href="mailto:voteananda@gmail.com">voteananda@gmail.com</a>	Date    7/15/2023  Daytime Phone 608-220-5187
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**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)

SCHEDULE 2-A

**Gross Expenditures**

IN-KIND	DATE	NAME	ADDRESS	CITY	ST	ZIP	PURPOSE	AMOUNT	COMMENTS
	1/31/2023	Summit Credit union					bank fees	\$10.00	
	0/28/23							\$10.00	
	31-Mar							\$10.00	
	4/30/2023							\$10.00	
	5/30/2023							\$10.00	
	6/30/2023							\$10.00	