

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) Friends of Nicki Vander Meulen					
A2. Committee/Conduit ID Number (if applicable)	A3. Email nkvander@yaho	A3. Email nkvander@yahoo.com		A4.Phone: 608-332-2807	
A5. Mailing Address 309 w. Washington Ave. Unit 3	A6.Madison		A7.WI	A8.53703	
SECTION B: REPORT INFORMATION					
B1. Report Type (Choose One) January Continuing July Continuing Spring Pre-Elect		☐ 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 previous campaign finance. Example: If your previous reports.	B3. Reporting Period Start Date July 1, 2021				
			nuary 8, 2022		
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 that will not accept contributions, make disburse aggregate amount of more than \$2,000 in a calendar year ar campaign finance reports. Exempt status is effective only for granted. Registrants wishing to remain on exempt status mus not claim exemption in the year of their election before the definition.	C1. Exemption Request and Affirmation X Yes, this registrant is eligible for a filing exemption and would like to request an exemption for this calendar year. 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)(d).					
Authorized Representative D1. Printed Name D2. Signature D3. Date					
D1. Printed Name	D2. Signature				
Nicki Vander Meulen	ricki routdel Meren			1-8-22	

