

Campaign Finance Report

Short Form GAB-2a

Government Accountability Board

GAB ID Number

<input type="checkbox"/>	Spring	<input type="checkbox"/>	Fall	<input type="checkbox"/>	Special	Pre-Primary _____	<input type="radio"/>	Continuing Report due Jan. 31. _____
<input checked="" type="checkbox"/>	Spring	<input type="checkbox"/>	Fall	<input type="checkbox"/>	Special	Pre-Election _____	<input type="radio"/>	Continuing Report due July 20. _____

Friends of Shiva Bidar-Sielaff

Name of Candidate or Committee (in full)

2704 Kendall Ave, Madison, WI 53705

Address

(608) 220-6986

Daytime Phone

I certify that the above named committee or candidate did not receive contributions or other income, make disbursements, or incur obligations during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills filing requirements under Sec. 11.06(9), Stats.

Signature of Committee Treasurer or Candidate	Date	Email Address
<i>Shiva Bidar-Sielaff</i>	03/31/2015	shivabidar@tds.net

GAB-2a | Rev 04/2014 | Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 |
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