Campaign Finance Report Short Form GAB-2a Government Accountability Board	GAB ID Number	DEGETWED
	ontinuing Report due Jan. 31, 2015	D G G G W G D D D D D D D D D D D D D D
Name of Candidate or Committee (in full)  Address	MEY Ridge Or. Modian	MADISON CITY CLERK
Daytime Phone	of receive contributions or other income, make	
I certify that the above named committee or candidate dearling disbursements, or incur obligations during the period cover the same as previously reported. This report fulfills filing resignature of Committee Treasurer or Candidate	equirements under Sec. 11.06(9), Stats.  Date Email Address	
Mett Brisk	2-2-15 mc Brink 3 46	yahoo.com

GAB-2a | Rev 04/2014 | Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 | Phone: 608-261-2028 | Fax: 608-264-9319 | Web: <a href="https://cfis.wi.gov">https://cfis.wi.gov</a> | Email: <a href="mailto:GABCFIS@wi.gov">GABCFIS@wi.gov</a>