

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

Is This Report an Amendment: Yes No

Instructions for completing schedules are on the back of each schedule.

COMMITTEE IDENTIFICATION

Name of Committee

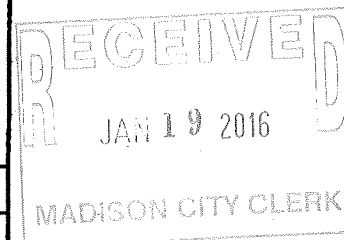
FRIENDS OF SKIDMORE

Street Address

13 RED MAPLE TRAIL

City, State and Zip Code

MADISON, WI 53717



OFFICE USE ONLY

Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form.

NAME OF REPORT

- January Continuing 2016 Pre-Primary _____
 July Continuing _____ Spring Fall Special Termination Report
 September Continuing _____ Pre-Election _____ also complete Schedule 4

SUMMARY OF RECEIPTS AND DISBURSEMENTS

	Column A This Period	Column B Calendar Year-To-Date
1. RECEIPTS		
1A. Contributions (Including Loans) from Individuals	\$ 0	\$ 0
1B. Contributions from Committees (Transfers-In)	\$ 0	\$ 0
1C. Other Income and Commercial Loans	\$ 0	\$ 0
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 0	\$ 0
2. DISBURSEMENTS		
2A. Gross Expenditures	\$ 18.00	\$ 476.00
2B. Contributions to Committees (Transfers-Out)	\$ 0	\$ 0
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 18.00	\$ 18.00

CASH SUMMARY

Cash Balance Beginning of Report	\$ 715.32
Total Receipts	\$ 0.00
Subtotal	\$ 715.32
Total Disbursements	\$ 18.00
CASH BALANCE END OF REPORT	\$ 697.32
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ 0
LOANS (Balance at the Close of This Period-3B)	\$ 0

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	Signature of Candidate or Treasurer	Date: 1/15/2016
PAUL E. SKIDMORE	<i>Paul Skidmore</i>	
	Email paul.skidmore@tds.net	Daytime Phone: 608-335-1529

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.

SCHEDULE 1-A

RECEIPTS

Contributions (Including Loans) From Individuals

Complete Committee Name
FRIENDS OF SKIDMORE

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation (if year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$	0.00	0.00
TOTAL ITEMIZED CONTRIBUTIONS	\$	0.00	0.00
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$	0.00	0.00
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$	0.00	0.00

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name
FRIENDS OF SKIDMORE

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input checked="" type="checkbox"/> In-Kind Offset		
	Check if: <input checked="" type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE \$ 0.00

TOTAL ITEMIZED EXPENDITURES \$ 0.00

(BAUHL FEES)
TOTAL UNITEMIZED EXPENDITURES \$ 18.00

TOTAL EXPENDITURES \$ 18.00