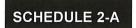
	IGN FINANCE REPOR MMITTEES OF WISCO		
Is This Report an Amendment:	ĭ No	ЕВК	MADISON CITY CL
Instructions for completing schedules are on the	back of each schedule.		1107 L T 700
COMMITTEE IDENTIFICATION			7102 7 I JUL 11 7 2017
Friends of Marsha Rummel Street Address		Uz	MIDODIO FFICE USE ONLY
1029 Sparght St 6C			THEE USE ONE!
City, State and Zip Code Madison W 53703		¥	
Please check if address is different than previously reported	, and complete the Campaign Re	gistration Statement in the	back of this form.
NAME OF REPORT			
☐ January Continuing ☐ Pre-Primary ☐ ☐ July Continuing 2017 ☐ September Continuing ☐ Pre-Election ☐	Spring	Fall Special	☐ Termination Report also complete Schedule 4
SUMMARY OF RECEIPTS AND	Column A	Column B	
DISBURSEMENTS	This Period	Calendar Year-To-Date	
1. RECEIPTS	•		
1A. Contributions (Including Loans) from Individuals	\$ 0	\$ 228	-
1B. Contributions from Committees (Transfers-In)	\$ 0	\$ 0	
1C. Other Income and Commercial Loans	\$ O	\$ 0	
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$	\$ 228	
2. DISBURSEMENTS			
2A. Gross Expenditures	\$ 10.00	\$ 47.32	
2B. Contributions to Committees (Transfers-Out)	\$ 100.00	\$ 600.00	٠,
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 110.00	\$ 647.32	
CASH SUMMARY			
Cash Balance Beginning of Report	\$ 3588-33	,	
Total Receipts	\$ -0-		
Subtotal	\$ 3588-33		
Total Disbursements	\$ 110.00		
CASH BALANCE END OF REPORT	\$ 3478.33		
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$		
LOANS (Balance at the Close of This Period-3B)	\$	(
I certify that I have examined this report and to the best		s true, correct and comple	ete.
Type or Print Name of Candidate or Treasurer Marsha Rummel	Signature of Candidate or Treasurer MASAP Email Marcha, Mmmel		7. 17.17 Phone: 608.7724555

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.



DISBURSEMENTS Gross Expenditures

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Complete Committee Name	Marsha	Rummel	
triends of	IMISIN	(with the	

Instructions for completing schedules are on the back of each schedule. Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount Of Person or Business to Whom Payment is Made 4/15/ bank fees / xfer to membership sayings 10.00 2017 Check if: In-Kind Offset Check if: In-Kind Offset Check if: In-Kind Offset 10.00 SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE 10.00 **TOTAL ITEMIZED EXPENDITURES** TOTAL UNITEMIZED EXPENDITURES 10.00 TOTAL EXPENDITURES

SCHEDULE 2-B

DISBURSEMENTS Contributions To Committees (Transfers-Out)

	9.	1
Page	of	

Friends of Marsha Rummel	Complete Committee	Name			
	Friends	of	Marsha	Rummel	

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

Date	Full Name, Mailing Address and Zip Code	Amount	Y-T-D Total
3/27/2017	Friends of Me Cheeks 3545 Nakoma Rd Wodson WI 53711 Check if: 1 In-Kind 1 Loan	16000	1000
	Check if: In-Kind Loan		
	Check if: In-Kind Loan		
	Check if:	,	
*			
	Check if:		
γ	Check if: In-Kind Loan		
	Check if: In-Kind Loan		
	Check if: In-Kind Loan	×	-
		,	
	Check if:		
	SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE	\$ 100°°	100000
	TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES	\$ 1000	10000