		FINANCE REPORT FEES OF WISCONS				
Is This Report an Amendment:	Yes	✓No				
Instructions for completing schedules are or	n the back of eac	h schedule.				
COMMITTEE IDENTIFICATION						
Name of Committee Soglin for Mayor						
Street Address PO Box 1228	5			0	OFFICE USE O	NLY
City, State and Zip Code Madison, WI 53701						
Please check if address is different than previously re	eported, and complet	e the Campaign Registration	n Statemer	nt in the	back of this form.	
REPORT PERIOD	2					
✓ January Continuing       2018       □ Pre-Prin         □ July Continuing       □         □ September Continuing       □ Pre-Ele		Spring Fall	□Sp	oecial	Termination I also complete So	
SUMMARY OF RECEIPTS AND						
DISBURSEMENTS		Column A This Perio	bd		n B Calendar	
1. RECEIPTS	.: d	\$500.	00	Yea	ar-To-Date \$27,664.00	
1A. Contributions (Including Loans) from Indiv 1B. Contributions from Committee (Transfers-I		\$300.			\$0.00	
1C. Other Income and Commercial Loans		\$0.			\$5.00	
TOTAL RECEIPTS (add totals from 1A, 1	B, and 1C)	\$500.			\$27,669.00	
2. DISBURSEMENTS		ер – = , А				
2A. Gross Expenditures		\$2,007.	.29		\$27,358.86	
2B. Contributions to Committees (Transfers-Ou	ıt)	\$0.	.00		\$0.00	
TOTAL DISBURSEMENTS (add totals f	from 2A and 2B)	\$2,007.	.29		\$27,358.86	
CASH SUMMARY	, in the	-				
Cash Balance Beginning of Report		\$6,331.	.78			
Total Receipts		\$500.	.00			
Subtotal		\$6,831.				
Total Disbursements		\$2,007.				
CASH BALANCE END OF REPORT		\$4,824.	.49			
<b>INCURRED OBLIGATIONS</b> (Balance at the Close of This Period-3A)		\$0.	.00			
LOANS (Balance at the Close of This Perio	d-3B)	\$16,250.	.00			

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:	01/16/2018
Scott Herrick	ASTAN	
	Email campaign@soglinformayo Daytime	Phone: (608) 257-1369

r.com

JAN 1 8 2018

MADISON CITY CLERK

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.

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to the penalties of ss.11.1400, 11.1401, Wis. Stats. The Government Accountability Board prescribes this form. Completed forms must be filed with your local clerk.

SCHE	RECEIPTS SCHEDULE 1-A Contributions (Including Loans) From Individuals		Page 2	of <u>6</u>
Complete Co Soglin fo	ommittee Name or Mayor			
Instructions for	r completing schedules are on the back of eac	h 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
08/02/2017	Ken Golden 2904 Gregory St Madison, WI 53711 Contributor Type: Individual Contribution Type: Monetary	Retired	\$500.00	\$500.00
	Check if: 🛄 In-Kind Loan 🗌 Conduit - Ethi	 cs ID#		

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SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$500.00
TOTAL ITEMIZED CONTRIBUTIONS	\$500.00
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$0.00
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$500.00

SCHEDULE 2-A

## DISBURSEMENTS **Gross Expenditures**

Complete Committee Name
Soglin for Mayor
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Instructions fo	or completing schedules are on the back of each schedule.		
Date 07/03/2017	Full Name, Mailing Address and Zip Code of Person or Business to Whom Payment is Made First Bank Merchant Services PO Box 407066 Fort Lauderdale, FL 33340 Payee Type: Other Expense Category: Monetary Expense Purpose: Bank Charges	Specific Purpose of Expenditure Bank fees	Amount \$26.62
Date	Full Name, Mailing Address and Zip Code of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
08/07/2017	First Bank Merchant Services PO Box 407066 Fort Lauderdale, FL 33340 Payee Type: Other Expense Category: Monetary Expense Purpose: Bank Charges	Bank Fees	\$1.50
Date	Check if: In-Kind Offset Full Name, Mailing Address and Zip Code of	Specific Purpose of Expenditure	Amount
12/07/2017	Person or Business to Whom Payment is Made USPS 215 Martin Luther Ki Madison, WI 53703 Payee Type: Business Expense Category: Monetary Expense Purpose: Administrative Expenses	PO Box rental	\$99.00
	Check if: In-Kind Offset		

\$127.12
\$2,007.29
\$0.00
\$2,007.29

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE

TOTAL ITEMIZED EXPENDITURES

TOTAL UNITEMIZED EXPENDITURES

TOTAL EXPENDITURES

SCHEDULE 2-A

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## DISBURSEMENTS **Gross Expenditures**

# Complete Committee Name

Soglin for Mayor

Instructions fo	r completing schedules are on the back of each schedule.		
Date 12/21/2017	Full Name, Mailing Address and Zip Code of Person or Business to Whom Payment is Made Melissa Mulliken Consulting 3306 Gregory St Madison, WI 53711 Payee Type: Business Expense Category: Monetary Expense Purpose: Consulting Fees - General Check if: In-Kind Offset	Specific Purpose of Expenditure Consulting fees	Amount \$1,200.00
Date 12/21/2017	Full Name, Mailing Address and Zip Code of Person or Business to Whom Payment is Made Melissa Mulliken Consulting 3306 Gregory St Madison, WI 53711 Payee Type: Business Expense Category: Monetary Expense Purpose: Administrative Expenses	Specific Purpose of Expenditure reimbursement for campaign data and web hosting	Amount \$529.90
Date 12/21/2017	Full Name, Mailing Address and Zip Code of Person or Business to Whom Payment is Made Paul Soglin 121 Standish Ct Madison, WI 53705 Payee Type: Individual Expense Category: Monetary Expense Purpose: Media - Online Advertising	Specific Purpose of Expenditure reimbursement	Amount \$150.27

\$1,880.17
\$2,007.29
\$0.00
\$2,007.29

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE

TOTAL ITEMIZED EXPENDITURES

TOTAL UNITEMIZED EXPENDITURES

TOTAL EXPENDITURES



# Loans Individual, Committee or Commercial ADDITIONAL DISCLOSURE

5 of 6 Page

## Complete Committee Name

Soglin for Mayor

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

Date	Full Name, Mailing Address and Zip Code of Paul Soglin	Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payment This Period	Outstanding Obligations End of This Period
	121 Standish Ct Madison, WI 53705		\$800.00	\$0.00	\$0.00	\$800.00
List All Endors	ers or Guarantors (if any)					
Full Name, Ma	ailing Address and Zip Code of Guarantor	Occupation				
		Amount Gu	aranteed Outstanding			
Date	Full Name, Mailing Address and Zip Code of Scott Herrick	Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payment This Period	Outstanding Obligations End of This Period
	14 Hidden Hollow Trl Madison, WI 53717		\$200.00	\$0.00	\$0.00	\$200.00
List All Endors	ers or Guarantors (if any)					
Full Name, Ma	illing Address and Zip Code of Guarantor	Occupation				
		Amount Gua	aranteed Outstanding			
Date	Full Name, Mailing Address and Zip Code of Paul Soglin	Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payment This Period	Outstanding Obligations End of This Period
	121 Standish Ct Madison, WI 53705		\$250.00	\$0.00	\$0.00	\$250.00
List All Endors	ers or Guarantors (if any)					
Full Name, Ma	iling Address and Zip Code of Guarantor	Occupation				
		Amount Gua	aranteed Outstanding		·····	

SUBTOTAL OUTSTANDING LOANS THIS PAGE	\$1,250.00
TOTAL OUTSTANDING LOANS	\$16,250.00

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# Loans Individual, Committee or Commercial ADDITIONAL DISCLOSURE

Page	6	of	6

Complete Corr							
Soglin for Mayor							
Instructions for completing schedules are on the back of each schedule.							
	Full Name, Mailing Address and Zip Code of Loan Source		Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payment This Period	Outstanding Obligations End of This Period	
	Paul Soglin						
	121 Standish Ct Madison, WI 53705		\$10,500.00	\$0.00	\$0.00	\$10,500.00	
List All Endorsers or Guarantors (if any)							
Full Name, Mailing Address and Zip Code of Guarantor		Occupation					
		Amount Gua	aranteed Outstanding				
	Full Name, Mailing Address and Zip Code of	Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payment This Period	Outstanding Obligations End of This Period	
Duto	Scott Herrick 14 Hidden Hollow Trl Madison, WI 53717		\$4,500.00	\$0.00	\$0.00	\$4,500.00	
11.1 011 7.1.1.							
List All Endorsers or Guarantors (if any)							
Full Name, Mailing Address and Zip Code of Guarantor							
		Amount Gua	aranteed Outstanding				

SUBTOTAL OUTSTANDING LOANS THIS PAGE	\$15,000.00
TOTAL OUTSTANDING LOANS	\$16,250.00