

## CAMPAIGN FINANCE REPORT—STATEMENT OF NO ACTIVITY

STATE OF WISCONSIN

**Note**: Use of this form is required by the Ethics Commission for reporting no activity in a campaign finance filing period. Completion of this form is mandatory for committees that file on paper. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose.

SECTION A: REGISTRANT INFORMATION			
A1. Name of Committee/Conduit (in full)			
KATE TOEWS FOR SCHOOL BOARD  A2. Committee/Conduit ID Number (if applicable)  A3. Email  A4. Phone			
	danerman@gmail.com 734-478-8588		
A5. Mailing Address 2115 MADISON ST	MADISON	•	A7. State   A8. Zip
SECTION B: REPORT INFORMATION			
B1. Report Type (Choose One)    January Continuing   Spring Pre-Primary     July Continuing   Spring Pre-Election	Fall Pre-Primary September Fall Pre-Election	☐ Special Pre-Pri ☐ Special Pre-Ele ☐ Special Post-El	ection ection
Reporting Period  The start date for your campaign finance report should be the day fo previous campaign finance. Example: If your previous report had a san end date of June 30, this report should have a start date of July 1.	B3. Reporting Period Start Date  B4. Reporting Period End Date		
Review the filing calendar with reporting periods online at: https://E	6130/19		
Party and Legislative Campaign Committees Only			
B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One)  General Fund  Segregated Fund			
SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL)			
Filing Exemption Registrants that will not accept contributions, make disbursements, or aggregate amount of more than \$2,000 in a calendar year are eligible campaign finance reports. Exempt status is effective only for the caler granted. Registrants wishing to remain on exempt status must renew enot claim exemption in the year of their election before the day they again.	C1. Exemption Request and Affirmation  Yes, this registrant is eligible for a filing exemption and would like to request an exemption for this calendar year.  No, this registrant is not requesting exemption		
SECTION D: CERTIFICATION			
I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. $\S$ 11.0103(3)(d).			
Authorized Representative			
D1. Printed Name  DANIEL ERMAN  D2. Sig	snature		D3. Date [2/10/14

