W	NECE										
	Is this report an Amendment?).	NO			JUL 1	7 20)17 U			
COMMITTEE IDENTI	FICATION										
Name of Committee	Ed Hughes for School Board					MADISON	CITY	CLERK			
Address	5 Hallows Cir										
City, State, ZIP	Madison WI 57304					OFFICE US	E ON	LY			
Please check if address is	s different than previously reported	_									
NAME OF REPORT	Jan 20 Continuing Pre-Primary	220			Spring	<u> </u>		Special			
	July 2017 Continuing Pre-election 2	20			Spring	Fal	Special				
1	September 20 Continuing										
SUMMARY OF RECE	IPTS AND DISBURSEMENTS		Column A		Column B	Audited Tot					
1. RECEIPTS		Т	his Period		YTD	Office Use (Only				
A. Contributions include	ding Loans from Individuals	\$	=	\$	16,612.00						
B. Contributions from	Committees (Transfers-In)	\$	-								
C. Other Income and	Commercial Loans	\$									
TOTAL RECEIPTS (A	dd totals from 1A, 1B, and 1C)	\$	-	\$	16,612.00						
2. DISBURSEMENTS											
A. Gross Expenditures	3	\$	306.95	\$	11,402.35						
B. Contributions to Co	mmittees (Transfers-Out)	\$	2,000.00	\$	2,000.00						
TOTAL DISBURSEM	ENTS (Add totals from 2A and 2B)	\$	2,306.95	\$	13,402.35						
CASH SUMMARY											
Cash Balance at Begir	nning of Report	\$	5,516.60								
Total Receipts		\$	-								
Subtotal		\$	5,516.60								
Total Disbursements		\$	2,306.95				1				
CASH BALANCE AT I	END OF REPORT	\$	3,209.65				1				
INCURRED OBLIGAT	TIONS (at close of period)	\$	-								
LOANS (at close of pe	riod)	\$	-								
I certify that I have examin	ned this report and to the best of my knowle	edge a	nd belief it is true	e, co	rrect and complet	е.					
Type or Print Name of Candidate	e or Treasurer		re of Candidate or T	reas	urer	Date	7/	16/2017			
Jill Jokela		Jíll)	Tokela								
		Email	I- @ - I- I- I			Daytime Phone	608-4	69-3768			
		Щоке	la@sbcglobal	<u>.net</u>							

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.

Print the completed report and file with your local clerk or election commission by the filing deadline. ETHCF-2LE (01/16)

Gross Expenditures

SCHEDULE 2-A

IN-KIND	DATE	DATE NAME	ADDRESS	200	ST	ZIP	PURPOSE	AMOUNT	COMMENTS
	4/3/2017		1627 Main Ave, Suite 1	ng p	S	9583	95838 credit card processing	\$56.95	
	3/30/2017	Laura Verhoff	5342 Summit Rd	Madison	ΙM	5370	14 refund of contribution made 2/2	\$250.00	
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SA AMOUNT YTD COMMENTS SA SA OOD SA OOD SA OOD SA OOD SA OOD OOD	continuation																								
* 2 000 00	\$ 4,000.00																								
AMOUNT 2 000 00	4 4,000.00																								
ZIP 53713	01.700																								
ST	3																								
Madison CITY															The second secon										- I I I I I I I I I I I I I I I I I I I
ADDRESS 827 Dane St	1						And the second s	WATER THE TAXABLE PROPERTY OF				MANAGE AND THE STREET,		***************************************				HALL STATE OF THE							
Ethics ID#																									
IN-KIND DATE NAME 3/24/2017 Community and Ali Muldrow																									
DATE 3/24/2017																									
IN-KIND																									

SCHEDULE 2-B