

## 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.

A1. Name of Committee/Conduit (in full) Friends of Ava Reddy  A2. Committee/Conduit ID Number (if applicable)  A3. Email reddyavra@gmail.com  A4. Phone reddyavra@gmail.com  A5. Mailing Address g04 Shootingstar Rd  A6. City Grayslake  A6. City A7. State A8. Zip 60030  SECTION B: REPORT INFORMATION  B1. Report Type (Choose One)   January Continuing   January Continuing   Spring Pre-Primary   Jaly Continuing   Spring Pre-Election   Spring	SECTION A: REGISTRANT INFORMATION							
A3. Email reddyavra@gmail.com  A5. Mailing Address 904 Shootingstar Rd  A6. City Grayslake  A7. State B7. State B7. Special Fre-Primary January Continuing January Continuing July Continuing July Continuing Spring Pre-Election Fall Pre-Election Fall Pre-Election Fall Pre-Election Special Pre-Primary Special Pre-Election B8. Reporting Period The start data for your campaign finance report should be the day following the end date of your previous campaign finance. Example: If your previous report had a start date of January 1 and ane date of them 30, this report should have a start date of July 1.  Review the filing calendar with reporting periods online at: https://Ethics.wi.gov/FilingCalendar  Party and Legislative Campaign Committees Only Segregated Fund Segregate amount of more than \$2,000 in a calendary year are eligible for excentional formal for this campaign finance reports. Exempt status is effective only for the calendary year are eligible for excentional formal for this calendary year.  SECTION D: CERTIFICATION  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 remans the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3)(d).  Authorized Representative  D1. Printed Name  D2. Signature  D3. Date	A1. Name of Committee/Conduit (in full)							
A5. Mailing Address 904 Shootingstar Bd  A6. City Grayslake    A7. State   A8. Zip	Friends of Avra Reddy							
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SECTION B: REPORT INFORMATION  B1. Report Type (Choose One)		reddyav	reddyavra@gmail.com			8474060720		
SECTION B: REPORT INFORMATION  Bi. Report Type (Choose One)    January Continuing   Spring Pre-Primary   September   Special Pre-Primary   Special S	A5. Mailing Address	A6. City	A6. City			A7. State	A8. Zip	
B1. Report Type (Choose One)   January Continuing   Spring Pre-Primary   Spring Pre-Primary   September   Special Pre-Primary   Special Pre-Election   Special Pre-Election   Special Pre-Election   Special Pre-Election   Special Pre-Election   Special Pre-Election   Special Pre-Primary   Special Pre-Election   Special Pre-Primary   Special Pre-Election   Special Pre-Election   Special Pre-Election   Special Pre-Election   Special Pre-Primary   Special Pre-Election   Special Pre-Primary   Special Pre	904 Shootingstar Rd	Graysla	Grayslake			L	60030	
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D1. Printed Name D2. Signature D3. Date								
	Authorized Representative							
Avra Reddy 2/18/2022	D1. Printed Name	D2. Signature —					D3. Date	
	Avra Reddy						2/18/2022	