

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

Is This Report an Amendment: Yes No

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

COMMITTEE IDENTIFICATION

Name of Committee

COMMITTEE TO ELECT SHERI CARTER

Street Address

3113 ASHFORD LANE

City, State and Zip Code

MADISON WI 53713

OFFICE USE ONLY

Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form.

NAME OF REPORT

- January Continuing _____ Pre-Primary _____
 July Continuing 22 Spring Fall Special
 September Continuing _____ Pre-Election _____
- Termination Report
also complete Schedule 4

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

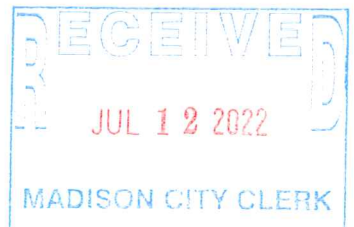
	Column A This Period	Column B Calendar Year-To-Date
1A. Contributions (Including Loans) from Individuals	\$	\$
1B. Contributions from Committees (Transfers-In)	\$	\$
1C. Other Income and Commercial Loans	\$ 1.75	\$ 1.75
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 1.75	\$ 1.75

2. DISBURSEMENTS

2A. Gross Expenditures	\$ 5.00	\$ 5.00
2B. Contributions to Committees (Transfers-Out)	\$	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 5.00	\$ 5.00

CASH SUMMARY

Cash Balance Beginning of Report	\$ 13,693.75
Total Receipts	\$ 1.75
Subtotal	\$ 13,695.50
Total Disbursements	\$ 5.00
CASH BALANCE END OF REPORT	\$ 13,690.50
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$
LOANS (Balance at the Close of This Period-3B)	\$ 612.36



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 <i>DONALD R. HOZEC, Treasurer</i>	Signature of Candidate or Treasurer <i>Donald R. Hozec</i>	Date: <i>7-12-22</i>
	Email	Daytime Phone:

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.

Other Income and Commercial Loans

Date	Name	Address	City	ST	Zip	Reason for Income	Comments	Amount
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6/30	SUMMIT CREDIT UNION	PO Box 8046	MADISON	WI	53708	DIVIDENDS		1,75
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Gross Monetary Expenditures

Date	Name	Address	City	ST	Zip	Purpose	Comments	Amount
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1/31 SUMMIT CREDIT UNION

PO BOX 8046

MADISON WI 53708

ANNUAL CARD FEE

5.00